

ATTACHMENT

Inspection Report Cover Sheet
For RCRA Inspections

TO BE COMPLETED BY THE ENSV ADMINISTRATIVE ASSISTANT. Please complete one cover sheet per original inspection report and affix this cover sheet to the top of the report.

1. Your name: Donna Arnold
2. Date document was submitted to the Records Center (MM/DD/YYYY): 11/14/12
- 3.a. Facility/Company or Site Name:
Clean Harbors
- b. Facility address:
2549 N. New York Ave. Wichita, KS
- c. EPA ID number: KSD007246846
4. Inspection Date(s): 10/18/12
5. Inspector's Name and Division/Branch:
Mike Martin EFCB/ENSV
6. Applicable Program (RCRA/Multimedia, etc.): _____
7. Number of pages in the inspection report: 106

NOTES TO RECORDS CENTER:

* Please scan and process this report in accordance with the "PROCEDURE FOR DIGITIZING AND COPYING INSPECTION REPORTS" (7/6/07).

7/27/12

* Please file this report in Doc Category: Enforcement.

RCRA



551069

REPORT OF RCRA COMPLIANCE EVALUATION INSPECTION

At

CLEAN HARBORS KANSAS LLC

2549 North New York Avenue

Wichita, Kansas 67219

(316) 833-4952

RCRA EPA ID Number: KSD007246846

On

October 17-18, 2012

By

U.S. ENVIRONMENTAL PROTECTION AGENCY

Region VII

Environmental Services Division

1.0 INTRODUCTION

At the request of the Air and Waste Management Division, I conducted a Resource Conservation and Recovery Act (RCRA) compliance evaluation inspection (CEI) at Clean Harbors Kansas LLC (hereafter CHK) located in Wichita, Kansas, on October 17-18, 2012. The CEI was conducted under the authority of Section 3007(a) of RCRA, as amended. During the CEI, I collected the information and data necessary to determine compliance with the applicable regulatory and statutory requirements. The inspection report and attachments present the results of the CEI. The CEI was conducted as a Level B Multi-Media Inspection and the *Region 7 Multimedia Screening Checklist* is included as Attachment 1.

2.0 PARTICIPANTS

CHK:

Nate Embery, Technical Services Specialist

Kent Frame, General Manager

Barry Brown, Truck Supervisor

U.S. Environmental Protection Agency (EPA):

Michael J. Martin, Environmental Scientist

3.0 INSPECTION PROCEDURES

Upon arriving at CHK at 10:10 a.m. (on October 17, 2012), I met with Mr. Embery. I presented him with my EPA credentials and explained the purpose and procedures of the inspection. I next presented him with a copy of RCRA section 3007(a), which provides inspection authority. I explained my need to collect accurate information and presented him with a copy of Title 18 U.S. Code, Sections 1001 and 1002. He was made aware of his confidentiality rights and was informed that a Confidentiality Notice would be provided at the end of the inspection to make or not to make any claims. Mr. Embery acted as the official facility representative on October 17, 2012. On October 18, 2012, Mr. Frame acted as the official facility representative and he was presented with the same inspection procedures that Mr. Embery had on October 17, 2012.

The inspection consisted of a discussion of facility operations, waste generation and waste management, a review of waste management records, and a visual inspection of the waste generation and management areas. See attachment 2 for the Facility Layout.

I conducted a visual inspection of the following areas at CHK:

- Building A (Old Office Space)
- Building B (Permitted Container Storage Area)
- Building C (Permitted Container Storage Area)
- Building D Permitted Container Storage Area)
- Building E (Main Office)
- Building H (Old Lab)
- Building I (Permitted Container Storage Area)
- Building J (Permitted Container Storage Area)
- Building K (Old Office Space)
- Drum Dock (Permitted Container Storage Area)
- Processing Area (Permitted Container Storage Area)

Information collected during the inspection is documented on the *Kansas Department of Health and Environment (KDHE) Hazardous Waste Generator Compliance Inspection Checklist* and on the *KDHE Hazardous Waste Treatment, Storage, and Disposal Compliance Inspection Checklist* (see attachment 3). Document photocopies and photographs were additionally collected as inspection documentation (see attachments 1-16 and photos 1-63).

At the conclusion of the inspection, I summarized my findings and recommendations with Messrs. Frame and Embery. I provided Mr. Frame with a *Confidentiality Notice*, which he signed, indicating no confidentiality claims were made by CHK (see attachment 4). I provided Mr. Frame with a *Receipt of Documents and Samples* and a *Notice of Violation (NOV)*, which he signed as acknowledgement of receipt (see attachments 5 and 6).

The following inspection documents and compliance assistance handouts were left with CHK:

Confidentiality Notice (Top page of the completed carbonless transfer set)

Receipt of Documents and Samples (Top page of the completed carbonless transfer set)

Notice of Violation (Top page of the completed carbonless transfer set)

Instructions for Responding to a Notice of Violation (EPA Handout)

Security Awareness (EPA Handout)

Commercial Motor Vehicle Transportation Security Planning (EPA Handout)

U.S. EPA Small Business Resources (EPA Handout)

Characteristic and Listed Hazardous Wastes (KDHE Technical Guidance Document)

Hazardous Waste Determinations and Documentation (KDHE Technical Guidance Document)

Container Management for Hazardous Waste Generators (KDHE Technical Guidance Document)

4.0 FACILITY DESCRIPTION

4.1 Facility Information and Operations

CHK is permitted by the KDHE to store and treat hazardous waste (Permit effective September 28, 2012 to September 28, 2022). See attachment 7 for the Hazardous Waste Management Permit (Parts I and II). CHK is staffed by 17 employees and operates from 8:00 a.m. to 5:00 p.m., Monday through Friday. Currently, CHK does not treat hazardous waste per their approved Permit. CHK's primary activity includes hazardous waste transfer operations under 40 CFR 263.13. Per the Permit, CHK has four active container management areas (Building C, Dock Area, Process Area, and Building I). CHK uses Building C and the Dock Area for their ten day hazardous waste transfer activities. The Process Area is shut down and has not been in operation for at least ten years. The permitted tanks (V1-V8) located at Process Area are non-operational (see photos #28-#32). Building I is used to store empty containers. Buildings B, D, and J are permitted storage units and no hazardous waste is stored in these areas. Building B, D, and J are used to store empty containers and supplies and a maintenance garage is operated in Building D. Per the Permit, CHK will close Buildings B, D, and J according to the Closure Plan in the Part B Application.

4.2 RCRA Status

CHK was last inspected for RCRA compliance on February 23-24, 2011 by the KDHE. According to the EPA RCRA Handler Information Report, CHK operates as a Large Quantity Generator (LQG) of hazardous waste and as a permitted hazardous waste treatment/storage/disposal facility (TSDF). See attachment 8 for the EPA RCRA Handler Information Report. I asked Mr. Embery to review the EPA RCRA Handler Information Report, which I provided to him during the inspection. He noted that their site contact is no longer Brian Key. Mr. Embery stated that Mr. Key left CHK during the May 2012 calendar month and Mr. Frame is the new site contact. Mr. Embery updated CHK's site contact information (addition of Mr. Frame's name and telephone number) on the EPA RCRA Handler Information Report.

Mr. Frame stated that over the last couple of months, he has traveled from San Antonio, Texas to CHK to perform General Manager duties. Mr. Frame stated that he recently moved from San Antonio, Texas to Wichita, Kansas during the week of October 15, 2012. I asked Messrs. Frame and Embury if CHK had notified the KDHE within 60 days of their site contact change. Messrs. Frame and Embury stated that they were not sure. I informed Messrs. Frame and Embury that their updated notification (change of site contact) must be submitted to the KDHE. A violation is noted in Section 6.0. At the time of the inspection, I determined CHK to be an LQG, a permitted TSDF, and a hazardous waste transfer facility.

4.3 Facility Waste Streams and Management

4.3.1. Incoming Wastes

Hazardous waste and non-hazardous waste storage containers transported to CHK are removed from trailers, bar coded, stored in the Dock Area and Building C, and shipped off-site within ten days to another TSDF. At the time of the inspection, the transfer containers (55 gallon containers and cardboard boxes) located at the Dock Area and at Building C were in good condition, closed, labeled with the words "Hazardous Waste" and marked with the date of accumulation (see photos #33-#38). The containers were stored for less than ten days and were being inspected weekly. I reviewed the management of their ten day transfer containers and no violations were noted.

4.3.2. Site Generated Wastes

Spent Personal Protective Equipment (PPE) - CHK generates one to two 55 gallon containers of spent PPE per month. Clean Harbors (El Dorado, Arkansas) disposes of their spent PPE as D001, D002, D004, D005, D006, and D007 characteristic hazardous waste. So far in the 2012 calendar year, CHK had disposed of twelve 55 gallon containers of spent PPE. See attachment 9 for the 2012 Uniform Hazardous Waste Manifests. At Building C, I observed three 55 gallon hazardous waste storage containers of spent PPE (see photos #43-#46). The containers were in good condition, closed, and labeled with the words "Hazardous Waste." One container was marked with the April 30, 2012 date of accumulation and two containers were not marked with the accumulation date. I informed Mr. Embury that the two 55 gallon hazardous waste storage containers of spent PPE must be marked with the date of accumulation. I reviewed the management of their spent PPE and a violation is noted in Section 6.0.

Collected Precipitation - CHK collects 700 to 2,000 gallons of precipitation per year from the sumps located in the Process Area and from the containment systems in their permitted Container Storage Areas. Clean Harbors (El Dorado, Arkansas) disposes of the collected precipitation as D004, D005, D006, D007, D008, and D010 characteristic hazardous waste. So far in the 2012 calendar year, CHK had disposed of 330 gallons of collected precipitation. See attachment 9 for the 2012 Uniform Hazardous Waste Manifests. At Building I, I observed two containment systems with accumulated precipitation that had not been removed (see photos #11-#19).

The water on the concrete was two to three inches deep. The water appeared to come from the roof and underneath one north facing door (see photos #11, #12, #13, #17, and #18). According to the National Weather Service Forecast Office, the city of Wichita had 0.32 inches of precipitation in October 2012, 2.64 inches of precipitation in September 2012, and 3.38 inches of precipitation in August 2012. See attachment 16 for the National Weather Service Forecast Office Reports. I asked Mr. Embery if he knew the length of time of accumulation of the water. Mr. Embery stated that he did not know. I informed Mr. Embery that the accumulated precipitation in the two containment systems must be removed per the requirements in Section D of their approved Permit B Application. A violation is noted in Section 6.0.

Waste Aerosols - So far in the 2012 calendar year, CHK had generated 20 gallons of waste aerosols. Clean Harbors (El Dorado, Arkansas) disposes of their waste aerosols as D001 characteristic hazardous waste. See attachment 9 for the 2012 Uniform Hazardous Waste Manifests. At the time of the inspection, I did not observe any waste aerosols being generated or stored on-site. I reviewed the management of their waste aerosols and no violations were noted.

Building D Miscellaneous Items - At Building D, I observed one 2 foot metal box containing one 200 ml plastic container labeled with the words "DI Water" and one 200 ml plastic container labeled with the words "HCL" (see photo #20). I asked Mr. Embery if the two containers stored waste. Mr. Embery stated that he did not know. I asked Mr. Embery if he knew the length of time of accumulation of the two containers. Mr. Embery stated that he did not know. I asked Mr. Embery if CHK had conducted a hazardous waste determination of the two containers. Mr. Embery stated "No." I informed Mr. Embery that CHK will need to conduct a hazardous waste determination on the two containers. A violation is noted in Section 6.0.

At the Building D Maintenance Garage, I observed the following stored on the concrete floor (see photo #21):

- One 13 ounce metal container labeled with the words "Kilz Stain Blocker"
- One 13 ounce metal container partially labeled with the words "Spray Enamel"
- Two 8 ounce metal containers labeled with the words "Oatley PVC Cement"
- One 12 ounce amber glass container labeled with the words "Sci/Spec Prepak Preservative"
- One 2 ounce plastic container labeled with the words "Fresh"
- One 18 ounce metal container labeled with the words "Seymour Traffic Marker"
- Two 10 ounce plastic containers labeled with the words "Black Magic"
- One 15 ounce metal container labeled with the words "Rust Oleum Marker Paint"
- One 11 ounce metal container labeled with the words "Dutch Boy Spray Enamel"
- One 16 ounce metal container labeled with the words "Dap Wood Dough"
- One 16.5 ounce metal container labeled with the words "Award Furniture Polish"
- One 14 ounce metal container labeled with the words "Sprayway Adhesive 88"
- One 11 ounce container labeled with the words "Krylon Interior/Exterior Enamel"

I asked Mr. Embery if the containers stored waste. Mr. Embery stated that he did not know. I asked Mr. Embery if he knew the length of time of accumulation of the containers. Mr. Embery stated that he did not know. I asked Mr. Embery if CHK had conducted a hazardous waste determination on the containers. Mr. Embery stated "No." I informed Mr. Embery that CHK will need to conduct a hazardous waste determination on the fifteen containers stored on the floor. A violation is noted in Section 6.0.

At the Building D Maintenance Garage, I also observed one flammable cabinet with a spilled black liquid located at the bottom shelf (see photos #22 and #23). I asked Mr. Embery if he knew the contents of the black liquid. Mr. Embery stated "No." I asked Mr. Embery if the black liquid was hazardous waste. Mr. Embery stated that he did not know. I asked Mr. Embery if CHK had conducted a hazardous waste determination on the spilled black liquid. Mr. Embery stated "No." The flammable cabinet stored at least 50 containers of various chemicals (16 ounce containers to one gallon containers). The containers included Ajax, muriatic acid, broadleaf herbicide, charcoal lighter fluid, polyvinyl chloride primer, hydraulic fluid, spray paint, and engine oil (see photos #22-#25). I asked Mr. Embery if the containers stored waste. Mr. Embery stated that he did not know. I asked Mr. Embery if he knew the length of time of accumulation of the containers. Mr. Embery stated that he did not know. I asked Mr. Embery if CHK had conducted a hazardous waste determination on the 50 containers. Mr. Embery stated "No." I informed Mr. Embery that CHK will need to conduct a hazardous waste determination on the unknown spilled black liquid and on the 50 containers. A violation is noted in Section 6.0.

In addition, I observed four cardboard containers of fluorescent lamps at the Building D Maintenance Garage (see photos #26 and #27). All four containers were in poor condition (dented and covered in dust) and two of the four containers were open. I asked Mr. Embery if the fluorescent lamps stored in the containers were waste. Mr. Embery stated that he did not know. I asked Mr. Embery if CHK had conducted a hazardous waste determination on the four containers of fluorescent lamps. Mr. Embery stated "No." I informed Mr. Embery that CHK will need to conduct a hazardous waste determination on the four containers of fluorescent lamps. A violation is noted in Section 6.0.

5.0 PERMIT CONDITIONS

See attachment 7 for the Hazardous Waste Management Permit (Parts I and II). I reviewed the following permit conditions:

- Security
 - I reviewed their security requirements and no violations were noted.
- General Inspection Requirements
 - CHK is following their inspection schedule set out in Sections F-3 and G-3 of the approved Part B Permit Application, except for conducting monthly inspections on a total of eleven fire extinguishers located at Buildings I and C. *This issue was inadvertently left off the NOV form.* See attachment 10 for the October 16, 2012 Inspection Record (Container Storage Inspection Form, Tank System Inspection Form, Landlord Form, and Daily In-Transit Inspection Report).
- Personnel Training
 - Hazardous waste training records were satisfactory for Brian Key (former General Manager who conducted hazardous waste inspections), Rodney Emery (Driver), David Bernard (Field Chemist), Victor Flowers (Driver), and Barry Brown (Truck Supervisor). Their written job descriptions for each hazardous waste management position and the written description of introductory and continuing training that will be given to each hazardous waste management position were satisfactory. I reviewed their personnel training records and no violations were noted.
- Special Provisions for Ignitable, Reactive, or Incompatible Waste
 - I reviewed their requirements for ignitable, reactive, or incompatible waste and no violations were noted.
- Preparedness and Prevention
 - At Buildings C and I, I observed a total of eleven fire extinguishers that had not been inspected monthly for expiration dates and adequate pressure (see photos #1-#10, #39-#42, #47, #48, and #54). At Building C, two fire extinguishers had no marked inspection dates, one fire extinguisher had a last inspection date of February 2012, and one fire extinguisher had no inspection tag. At Building I, three fire extinguishers had no marked inspection dates and four fire extinguishers had a last inspection date of April 30, 2012. At the time of the inspection, Mr. Embery stated that he was not aware that the eleven fire extinguishers were not being inspected monthly. A violation is noted in Section 6.0.
- Contingency Plan
 - I reviewed the Contingency Plan and it had not been amended to reflect the change of Emergency Coordinators (change from Brian Key to Kent Frame). See attachment 11 for the Emergency Coordinator List. A violation is noted in Section 6.0.

- Recordkeeping and Reporting
 - I reviewed CHK's 2012 biennial report, 2010-2012 uniform hazardous waste manifests, and 2010/2011 hazardous waste reports and no violations were noted. See attachments 12, 13, 14, and 15 for the 2012 Biennial Report, 2010 Hazardous Waste Report, the 2011 Hazardous Waste Report, and the 2011/2012 Internal Outbound Compliance Report.
- Financial Requirements
 - I reviewed their closure cost estimate and no violations were noted.
- Storage in Containers
 - The management of the ten day hazardous waste transfer containers located at the Dock Area and at Building C was satisfactory.
 - At Building C, I observed two 55 gallon hazardous waste storage containers of PPE not marked with the accumulation date (see photos #43-#45). A violation is noted in Section 6.0. At the southeast area of Building C, I observed hair-line cracks (width of Building C) and gaps in the containment system (see photos #55-#58, #62, and #63). In addition, the caulking material on the containment system appeared to be releasing from the concrete (see photos #59, #60, and #61). I informed Mr. Embery that the containment system in Building C must be free of cracks and gaps. A violation is noted in Section 6.0.
 - At the Dock Area, the coating on the containment system was not in good condition. The coating was cracked, peeling, and missing on some areas of the containment system (see photos #34, #35, and #49-#53). *This issue was inadvertently left off the NOV form.*
 - At Building I, I observed two containment systems with accumulated precipitation that had not been removed (see photos #11-#19). A violation is noted in Section 6.0.
- Storage and Treatment in Tanks
 - The Process Area is shut down and the permitted tanks (V1-V8) were non-operational (see photos #28-#32). At the time of the inspection, I did not verify if the Process Area was closed per the Closure Plan in the Part B Application.
- Air Emission Standards
 - I reviewed CHK's air emission standards (40 CFR 264 Subpart CC) requirements for their containers and no violations were noted.

6.0 VIOLATIONS

6.0.1. Updated Notification Not Submitted To The KDHE (NOV #1)

According to KAR 28-31-4 (c), information associated with a facility's EPA identification number must be up to date. CHK had not notified the KDHE within 60 days of the change of their site contact from Brian Key to Kent Frame.

6.0.2. Hazardous Waste Determinations Not Conducted (NOV #2)

According to 40 CFR 262.11 (as adopted by reference in the state of Kansas regulations), a hazardous waste determination must be made on all solid wastes. A hazardous waste determination had not been conducted on the following:

Building D

- One 200 ml plastic container labeled with the words "DI Water" (see photo #20).
- One 200 ml plastic container labeled with the words "HCL" (see photo #20).
- One 13 ounce metal container labeled with the words "Kilz Stain Blocker" (see photo #21).
- One 13 ounce metal container partially labeled with the words "Spray Enamel" (see photo #21).
- Two 8 ounce metal containers labeled with the words "Oatley PVC Cement" (see photo #21).
- One 12 ounce amber glass container labeled with the words "Sci/Spec Prepak Preservative" (see photo #21).
- One 2 ounce plastic container labeled with the words "Fresh" (see photo #21).
- One 18 ounce metal container labeled with the words "Seymour Traffic Marker" (see photo #21).
- Two 10 ounce plastic containers labeled with the words "Black Magic" (see photo #21).
- One 15 ounce metal container labeled with the words "Rust Oleum Marker Paint" (see photo #21).
- One 11 ounce metal container labeled with the words "Dutch Boy Spray Enamel" (see photo #21).
- One 16 ounce metal container labeled with the words "Dap Wood Dough" (see photo #21).
- One 16.5 ounce metal container labeled with the words "Award Furniture Polish" (see photo #21).
- One 14 ounce metal container labeled with the words "Sprayway Adhesive 88" (see photo #21).
- One 11 ounce container labeled with the words "Krylon Interior/Exterior Enamel" (see photo #21).

- One flammable cabinet storing an unknown spilled black liquid and 50 containers of various chemicals (16 ounce container to one gallon containers that include Ajax, muriatic acid, broadleaf herbicide, charcoal lighter fluid, polyvinyl chloride primer, hydraulic fluid, spray paint, and engine oil) (see photos #22-#25).
- Four cardboard containers of fluorescent lamps (see photos #26 and #27).

6.0.3. Accumulation Start Date Not Marked On Hazardous Waste Storage Containers (NOV #3)

According to 40 CFR 262.34(a)(2) (as adopted by reference in the state of Kansas regulations) and Section D of the approved Permit B Application, the accumulation start date must be marked on storage containers of hazardous waste. At Building C, two 55 gallon hazardous waste storage containers of PPE were not marked with the accumulation date (see photos #43-#45).

6.0.4. Fire Extinguishers Not Inspected Monthly (NOV #4)

According to 40 CFR 264.33 (as adopted by reference in the state of Kansas regulations) and Section F of the approved Permit B Permit Application, monthly inspections on fire extinguishers must be conducted. Four fire extinguishers at Building C and seven fire extinguishers at Building I had not been inspected monthly for expiration dates and adequate pressure (see photos #1-#10, #39-#42, #47, #48, and #54).

6.0.5. Contingency Plan Not Amended (NOV #5)

According to 40 CFR 264.54 (as adopted by reference in the state of Kansas regulations) and Section H of the approved Part B Permit Application, the Contingency Plan must be amended when there is a change to the list of Emergency Coordinators. Their Contingency Plan had not been amended to reflect the change of Emergency Coordinators (change from Brian Key to Kent Frame). See attachment 10 for the Emergency Coordinator List.

6.0.6. Containment System Not Free Of Cracks And Gaps (NOV #6)

According to 40 CFR 264.175(b)(1) (as adopted by reference in the state of Kansas regulations) and Section D of the approved Permit B Application, the containment system must be free of cracks and gaps. At the southeast area of Building C, hair-line cracks and gaps were observed in the containment system (see photos #55-#58, #62, and #63). Also, the caulking material on the Building C containment system appeared to be releasing from the concrete (see photos #59, #60, and #61).

6.0.7. Accumulated Precipitation In Containment Systems Not Removed (NOV #7)

According 40 CFR 264.175(b)(5) (as adopted by reference in the state of Kansas regulations) and Section D of the approved Permit B Application, accumulated precipitation must be removed. Two containment systems located at Building I had accumulated precipitation (two to three inches deep) that had not been removed (see photos #11-#19).

Inspection Schedule Per The Permit Not Conducted

This issue was inadvertently left off the *NOV form*. According to 40 CFR 264.15(b)(1) (as adopted by reference in the state of Kansas regulations) and Sections F-3 and G-3 of the approved Part B Permit Application, CHK must conduct monthly inspections on their fire extinguishers. CHK had not conducted monthly inspections on four fire extinguishers at Building C and on seven fire extinguishers at Building I.

Containment System Not Free Of Cracks And Gaps

This issue was inadvertently left off the *NOV form*. According 40 CFR 264.175(b)(1) (as adopted by reference in the state of Kansas regulations) and Section D of the approved Permit B Application, the containment system must be free of cracks and gaps. At the Dock Area, the coating on the containment system was cracked, peeling, and missing on some areas (see photos #34, #35, and #49-#53).

7.0 SUMMARY

Other than the items specifically noted in this narrative, I observed no additional issues or potential violations. However, further EPA review may change or add to my findings. During this inspection, I reviewed the CHK's compliance to their Permit and to the LQG regulatory requirements.



Michael J. Martin

Environmental Scientist

Date: November 14, 2012

Attachments

- 1) *Region 7 Multi-Media Screening Checklist* (2 pages)
- 2) Facility Layout (1 page)
- 3) KDHE Inspection Checklists (22 pages)
- 4) *Confidentiality Notice* (1 page)
- 5) *Receipt of Document and Samples* (1 page)
- 6) *Notice of Violation* (4 pages)
- 7) Hazardous Waste Management Permit (Parts I and II) (CD attached to 1 page)
- 8) EPA RCRA Handler Information Report (2 pages)
- 9) 2012 Uniform Hazardous Waste Manifests (7 pages)
- 10) October 16, 2012 Inspection Record (8 pages)
- 11) Emergency Coordinator List (1 page)
- 12) 2012 Biennial Report (3 pages)
- 13) 2010 Hazardous Waste Report (7 pages)
- 14) 2011 Hazardous Waste Report (17 pages)
- 15) 2011/2012 Internal Outbound Compliance Report (6 pages)
- 16) National Weather Service Forecast Office Reports (10 pages)

Photo Log (5 pages)

Photographs (33 pages/63 photos)

REGION VII MULTIMEDIA SCREENING CHECKLIST

Facility Name: Clean Harbors Kansas LLC Inspector: Michael J. Martin
 Facility Ownership: Clean Harbors Kansas LLC Primary Media: RCRA
 Street: 2549 N. New York Avenue Inspector Phone Ext.: 7149
 City: Wichita State: KS Zip: 67219 Date: 10/17-10/18
 Phone: (316) 833-4952 Facility Contact: Kent Frame SIC/NAICS Code: 562211
 Number of Employees: 17 Work Hours/Shifts: 8am-5pm Mon-Fri. Facility Subject to OSHA regulations Yes ☒ No ☐

Main facility activity, major process chemical(s) & description: TSDF

(Check all that apply): painting/coating (water-based ☐, solvent-based ☐) , printing ☐ , reacting ☐ , formulating ☐ , distilling ☐ ,
 water treatment ☐ , refrigeration ☐ , manufacturing ☐ , parts washers/degreasing (water-based ☐ , halogenated-based ☐ ,
 non-halogenated-based ☐) , combustion (boiler, furnaces, oxidizers) ☐ plating (chrome ☐ , other _____).

ENVIRONMENTAL JUSTICE (Note: Forward to EJ if a concern is identified during your inspection)

1. Is the facility located in an apparent low income area (e.g., with many abandoned and dilapidated properties)? No ☒ (stop) Yes ☐
 If yes, is facility less than 1000 feet from nearest routinely occupied property (house, school, etc.)? No ☐ (stop) Yes ☐ **Forward to EJ**

EMERGENCY PLANNING & COMMUNITY RIGHT TO KNOW ACT (EPCRA) & TOXIC SUBSTANCE CONTROL ACT (TSCA)

1. Did facility file a Tier II report with fire department, Local & State Emergency Planning Committee? Yes ☐ No ☒ **Forward to EPCRA**
 2. Did facility manufacture, import, or process (formulate, blend, package) >25,000 lbs of a chemical or >100 lbs of a Persistent Bioaccumulative Toxin (lead, mercury, or polycyclic aromatic compounds) at any time over the last 5 years? No ☐ (stop) Yes ☐ **Forward to EPCRA**
 3. Has the facility: **If any box in question 3 is marked - Forward to EPCRA**
 a. Stored ≥500 lbs of ammonia ☐ , ≥100 lbs of chlorine ☐ , or ≥10,000 lbs of an industrial chemical ☐ , at any time over the last 2 years? ☐
 b. Stored ≥10,000 lbs of pressurized flammable material (propane, methane, butane, pentane, etc.) at any time over the last 2 years? ☐
 c. Used ≥10,000 lbs of ammonia ☐ , chlorine ☐ , halogenated solvents ☐ , solvent-based paints ☐ , or solvents ☐ , or nitrated compound, over the last calendar year? ☐
 d. Generated ≥ one half pound of metal dusts, fumes, or metal turnings, over the last calendar year? ☐
 4. Does the facility have any oil filled electrical equipment No ☐ (stop) Yes ☒ **Forward to TSCA and ask** Has facility tested oil filled equipment to determine PCB content; No ☒ Yes ☐ number containing PCBs greater than 50 ppm _____ and percent of all equipment tested _____. Is equipment leaking (including wet or weeping equipment)? No ☐ Yes ☐ - **Get Photo**

CLEAN WATER ACT (CWA) - National Pollution Discharge Elimination System (NPDES), Industrial Pretreatment, Storm Water, & Wetlands

1. Does the facility discharge any wastewater to storm sewers, surface water, or the land? No ☒ (stop) Yes ☐
 If yes, are all wastewater discharges permitted? Yes ☐ No ☐ **Forward to CWA**
 2. Does the facility have process wastewaters that are discharged to a city POTW (Publicly Owned Treatment Works)? No ☒ (stop) Yes ☐
 If yes, are the discharges permitted by: State? ☐ , City? ☐ - If yes, Stop here. No ☐ **Forward to CWA**
 If yes, does the city have a state or EPA approved pretreatment program? Yes ☐ No or Don't Know ☐ **Forward to CWA**
 3. During rainfall events, can storm water carry pollutants from manufacturing, processing, storage, disposal, shipping and receiving areas, or from construction sites >1 acre, to storm sewers or surface water? No ☒ (stop) Yes ☐
 If yes, does the facility have an NPDES permit for these storm water discharges? Yes ☐ No ☐ **Forward to CWA**
 4. Did you see any wastewater discharges not identified by the facility? No ☒ (stop) Yes ☐ - Identify location, time, appearance of discharge: _____
 (Get Photo) **Forward to CWA**
 5. Does the facility have any wetland areas (e.g. streams, ponds, or temporarily wet areas)? No ☒ (stop) Yes ☐
 If yes, have any wetland areas been dredged, filled, channelized, dammed, or had gravel removed from them within the last 5 years?
 No ☐ (stop) Yes ☐ - Identify location and timeframe _____ (Get Photo) **FWD to Wetlands**

SAFE DRINKING WATER ACT (SDWA) - Underground Injection Control (UIC) & Public Water System (PWS)

1. Does facility discharge any liquids to the subsurface (septic systems, disposal wells, cesspools, etc.)? No ☒ (stop) Yes ☐ Forward to UIC
If yes, do these liquid wastes consist of sanitary wastewater only? Yes ☐ No ☐
2. Does facility provide drinking water to 25 people or more from its own source (private well, pond, etc)? No ☒ (stop) Yes ☐ Forward to PWS
If yes, does the facility test or monitor its drinking water in order to comply with state regulations? Yes ☐ No ☐

CLEAN AIR ACT (CAA) and CFCs

1. Do you see any dense, non-steam, smoke or dust emissions leaving the facility property? No ☒ Yes ☐ Forward to CAA
Source _____ (Get Photo)
2. Does the facility have any new air pollution emitting equipment that was constructed or installed in the past 5 years? No ☒ (stop) Yes ☐
If yes, is equipment permitted? Yes ☐ No ☐ Forward to CAA Describe: _____
3. Does the facility have any cooling units that contain >50 lbs of refrigerant? No ☐ (stop) Yes ☒ Forward to CFC
If yes, are these units: Self-serviced? ☐ Contract Serviced? ☒ - Service Company: Local Company (Name not Available)
4. Does the facility have a refrigeration process that contains more than 10,000 lbs of ammonia? No ☒ (stop) Yes ☐ Forward to EPCRA/RMP
5. Does the facility service motor vehicle air conditioning systems? No ☒ (stop) Yes ☐ Forward to CFC

RESOURCE CONSERVATION AND RECOVERY ACT (RCRA) and UNDERGROUND STORAGE TANKS (UST)

1. Does the facility generate more than 30-gallons (220 lbs./100kg) of hazardous waste per month or at any one time? No ☐ (stop) Yes ☒
If yes, does facility have an EPA Hazardous Waste Identification Number? Yes ☒ (stop) No ☐ Forward to RCRA
2. Is hazardous waste treated ☒, stored >90-days ☒, burned ☐, land filled ☐, put in surface impoundments ☐ or waste piles ☐?
No ☐ (stop) Yes ☒ If yes, is the facility permitted for above described activity? Yes ☒ No ☐ Forward to RCRA
3. Did you see or does the facility have any large quantities of materials **that the facility claims to be non-hazardous waste material** (>10 drums, roll-offs, waste piles, etc. - exclude clean office trash, cardboard, & packaging type wastes)? No ☒ (stop) Yes ☐

<u>Material Claimed To Be Non-Hazardous</u>	<u>How does the facility know these wastes are non-hazardous?</u>
_____	Testing, industry or manuf. info., MSDS, etc. <input type="checkbox"/> ; None available <input type="checkbox"/> Forward to RCRA
_____	Testing, industry or manuf. info., MSDS, etc. <input type="checkbox"/> ; None available <input type="checkbox"/> Forward to RCRA
_____	Testing, industry or manuf. info., MSDS, etc. <input type="checkbox"/> ; None available <input type="checkbox"/> Forward to RCRA
_____	Testing, industry or manuf. info., MSDS, etc. <input type="checkbox"/> ; None available <input type="checkbox"/> Forward to RCRA
_____	Testing, industry or manuf. info., MSDS, etc. <input type="checkbox"/> ; None available <input type="checkbox"/> Forward to RCRA
4. Did you see any leaking hazardous waste containers, drums, or tanks? No ☒ Yes ☐ Forward to RCRA
Describe: _____ (Get Photo)
5. Did you see any signs of spills or releases (e.g., dead or stressed vegetation, stains, discoloration)? No ☒ Yes ☐ Forward to RCRA
Describe: _____ (Get Photo)
6. Did you see any chemical or waste handling practices that concern you (access to children/public)? No ☒ Yes ☐ Forward to RCRA & EPCRA Describe: _____ (Get Photo)
7. Does the facility have any past or present underground petroleum product or hazardous material tanks? No ☒ Yes ☐ Forward to UST
8. Does the facility have any underground fuel tanks for emergency generators? No ☒ Yes ☐ Forward to UST

SPILL PREVENTION CONTROL AND COUNTERMEASURE PLAN (SPCC)

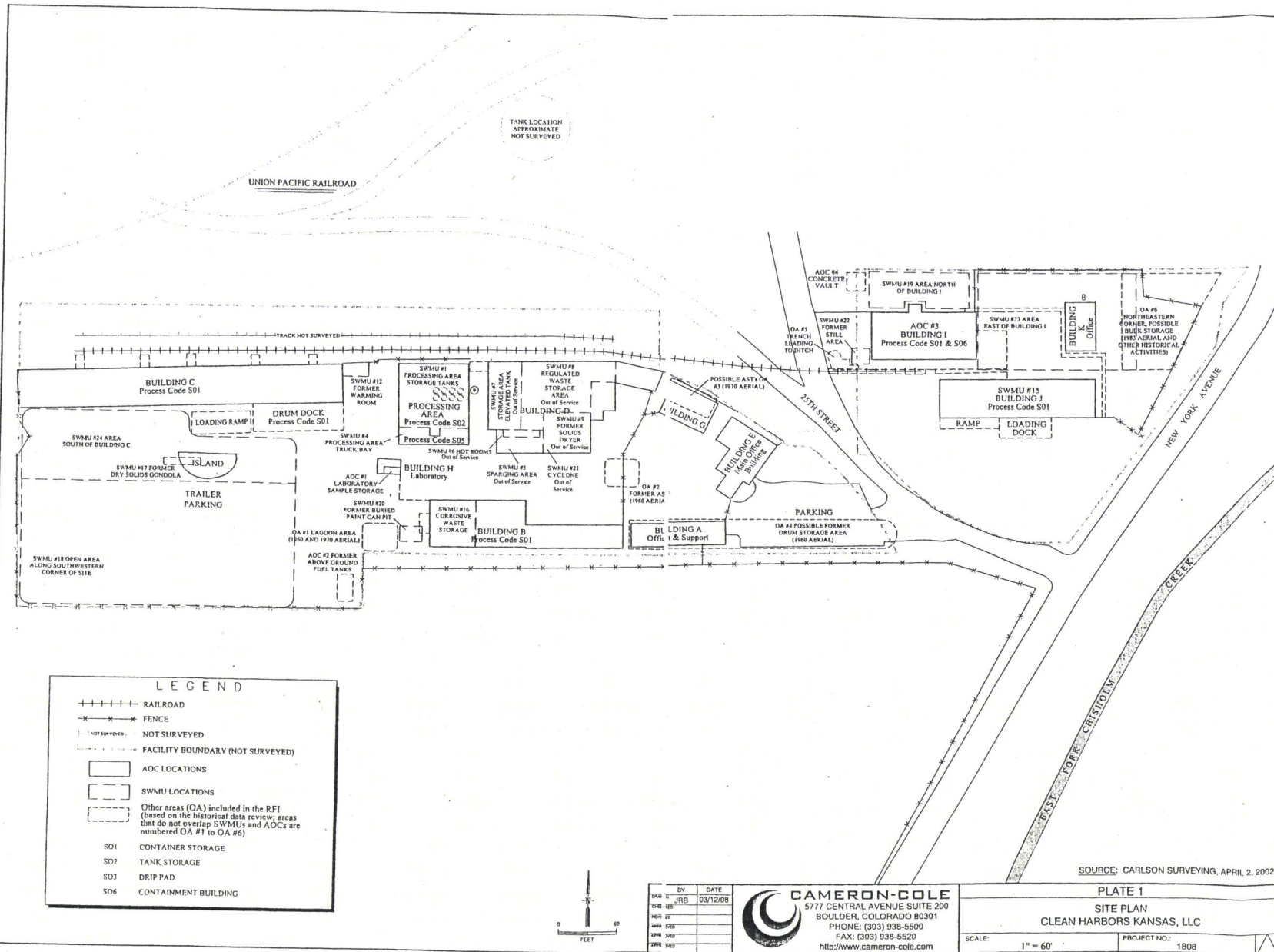
1. Does the facility have any aboveground oil tanks (petroleum, synthetic, animal, fish, vegetable), with an aggregate volume >1,320 gallons?
No ☒ (stop) Yes ☐ - Does the facility have a certified SPCC Plan? Yes ☐ No ☐ Forward to SPCC
If yes, are there secondary containment systems for the tanks? Yes ☐ No ☐ Forward to SPCC
If yes, are any tanks leaking where oil could reach waters of the State or U.S.? No ☐ Yes ☐ (Get Photo) Forward to SPCC

ENVIRONMENTAL MANAGEMENT SYSTEMS (EMS)

1. Does your facility have an EMS? No ☒ Yes ☐
2. Is the facility's EMS ISO 14001 certified? No ☒ Yes ☐

*** PLEASE TAKE PHOTOS TO DOCUMENT POTENTIAL PROBLEMS**

C:\Documents\658-WCHT\Bases for Permit Renewal\PLATE LAYOUT MODEL 3/14/2008 2:43 PM



KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
BUREAU OF WASTE MANAGEMENT
BUREAU OF ENVIRONMENTAL FIELD SERVICES

HAZARDOUS WASTE COMPLIANCE INSPECTION REPORT

Facility Information

EPA/ ID/Permit No. KSD007246846 Number of Employees 17
Facility Name Clean Harbors Kansas LLC District 02
Street 2549 North New York Avenue City Wichita ,KS ZIP 67219
Mailing Address (if different than above) _____
County Sedgwick e-mail _____
Phone (316) 833-4952 Cell Phone _____ Fax _____
Operating Hours and Days 8:00 a.m. to 5:00 p.m., Monday through Friday
Type of Business TSD

Were GPS coordinates previously taken for this facility and recorded in the appropriate database?

☐ Yes ☒ No

If no, did you take the GPS coordinates for this facility and record them in the appropriate database

☐ Yes ☒ No

Generator Classification:

☐ Closed/Inactive ☐ CESQG ☐ KSQG ☐ SQG ☒ LQG
☐ Not a Generator

If the facility is inactive and/or closed, please provide an explanation under Facility Description.

Other Regulated Activities:

☒ T/S/D Facility ☐ Tank System ☐ Subpart BB
(Complete applicable reports) ☐ Universal Waste Activities ☒ Transporter

Does the facility have a total above-ground storage capacity of used oil (excluding containers less than 55-gallons) of more than 1,320 gallons?

☐ Yes ☒ No ☐ NA

If yes, then the facility is subject to SPCC requirements due to used oil activities.

Does the facility have a SPCC Plan?

☐ Yes ☐ No ☐ NA

Did you inform the facility they are subject to SPCC

☐ Yes ☐ No ☐ NA

Facility Used Oil Activities (Attach a checklist for each one marked):

☐ Generator ☐ Collection Center / Aggregation Point
☐ Transporter / Transfer Facility ☐ Used Oil Processor / Re-Refiner
☐ Used Oil Burner (Off-Spec Fuel) ☐ Used Oil Marketer

No Used Oil Activities ☒

Inspection Information

☒ Routine ☐ Complaint

Inspection Time 10:10 a.m. Date(s) October 17-18, 2012

Name of person completing this report: Michael J. Martin

Inspection Participants (Include name of inspector(s)):

Name	Title	Company/ Agency	Participated In (Check all that apply)				Comments
			Intro Meeting	Walk-Through	Records Review	Exit Briefing	
Michael J. Martin	Env. Scientist	USEPA	✓	✓	✓	✓	
Nate Embery	Technical Services Specialist	Clean Harbors	✓	✓	✓	✓	
Kent Frame	General Manager	Clean Harbors			✓	✓	

Has the company declared any information/processes as trade secrets KSA 65-3447? ☐ Yes ☒ No
If yes, explain:

Has this facility been previously inspected by EPA and/or KDHE? ☒ Yes ☐ No
If yes, please summarize the following:

Date	Agency	Description of Violation (do not need to include reg. citations or comments)
02/24/11	KDHE	See the 02/24/11 Report

Changes since the previous inspection: (Please provide a brief description of any significant process, waste, management, ownership, or other pertinent changes since the previous inspection. If no previous inspection, this section should be blank.)

N/A

Facility Description: (# of buildings, approximate size of each building, basic activity in each building, processes, etc.), if not already described in previous reports or in changes since previous inspection section of this report:

N/A

Additional Information: (Include pertinent information from this inspection that does not pertain to violations or comments and is not already discussed in other sections)

*See the 10/17-18/2012 Inspection Report.

Exit Conference:

Date of Exit Conference: October 18, 2012

Were all violations, comments, corrective actions, and response due dates discussed with the facility if applicable? ☒ Yes ☐ No

Was the possibility of additional violations and possible enforcement discussed with the facility? ☒ Yes ☐ No

Were the generator status and applicable regulatory requirements discussed with the facility during the exit briefing and/or previously during the inspection? ☒ Yes ☐ No

List of items provided to facility:

NOC/NONC	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
BWM CD	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Container Posters	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other (list):		

Summary of additional information presented to facility during exit conference:

N/A

List of Attachments:

#	Description of Attachments (List Photolog as last attachment if applicable)
1	
2	
3	

Violations and Comments

Were Violations cited: ☒ Yes ☐ No

Were written comments made: ☒ Yes ☐ No

Provide a detailed description of each violation and comment, including photo references, attachment references, and regulatory citations below:

*See the 10/17-18/2012 Inspection Report.

WASTE STREAM TABLE

(List all hazardous wastes first, followed by solid wastes.)

Waste Description or Process	Waste Type (HW, SW, UW, UO, EX, ND)	If HW, list all codes	Waste Det. Method (PK, AD, or ND)	Waste Amount Generated Per Month		Waste Amount Presently in Storage	Oldest Accumulation Start Date	Present Waste Disposal Location (list name of destination facility and if not clear, put type of facility (MSWLF, TSDF, WWTF, etc.))
				Amount	Units			
Spent PPE	HW	D001, D002, D004, D005, D006, and D007	PK	One to two 55 gallon containers	Gallons	Three 55 gallon containers	04/30/12	Clean Harbors (El Dorado, Kansas)
Precipitation	HW	D004, D005, D006, D007, and D010	PK	700 to 2,000 gallons/ year	Gallons	NA	NA	Clean Harbors (El Dorado, Kansas)
Waste Aerosols	SW	D001	PK	20 gallons in 2012	Gallons	NA	NA	Clean Harbors (El Dorado, Kansas)
Various Chemicals in Building D Maintenance Garage	ND	NA	NA	NA	NA	NA	NA	NA

AD = Analytical Data

SW = Solid Waste

ND = Not Determined

EX = Exempt (includes CUP, laundered rags, etc.)

HW = Hazardous Waste

UW = Universal Waste

UO = Used Oil

HAZARDOUS WASTE GENERATOR COMPLIANCE INSPECTION REPORT

GENERAL REQUIREMENTS (GGR)

- | | YES | NO | NAV# |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 1. Has the generator evaluated each potentially hazardous waste to determine if it is hazardous? 40 CFR 262.11 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| a. If waste was tested, was the analysis conducted by a laboratory certified by KDHE? KAR 28-31-262(c)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b. If waste was not tested, did the generator use knowledge of the hazardous characteristics of the waste in light of the materials or processes used? 40 CFR 262.11(c)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c. Is documentation of the waste determination kept for three years from the date the waste was last sent to on-site or off-site treatment, storage or disposal? 40 CFR 262.40(c) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2. If hazardous waste is disposed of via the sanitary sewer to a Publicly Owned Treatment Works (POTW), has the generator received written approval from the City - POTW? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3. Has the facility obtained a Special Waste Disposal Authorization (SWDA) for each special waste? KAR 28-29-109(c) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4. If the generator treats or recycles hazardous waste on-site (such as in a still), do they count waste correctly? 40 CFR 261.5(d)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| a. If the waste is not counted, is it exempt because of a closed-loop system? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5. Has the KSQG, SQG, or LQG notified KDHE and obtained an EPA Identification Number? 40 CFR 262.12(a) (Mark NA only for CESQG) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Is current notification accurate? (Updates must be made within 60 days of the change) KAR 28-31-4 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

UNIVERSAL WASTE

- | | | | |
|--|--------------------------|-------------------------------------|--------------------------|
| 7. Does the facility choose to manage some of its waste as universal waste? If no, skip this section. If yes, check each type of universal waste that applies:
<div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 45%;"> <input type="checkbox"/> batteries
 <input type="checkbox"/> pesticides </div> <div style="width: 45%;"> <input type="checkbox"/> mercury-containing equipment
 <input type="checkbox"/> lamps </div> </div> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 8. Is the facility a small quantity handler of universal waste (accumulates <11,000 lbs or <5,000 kgs)? If the facility is a large quantity handler of universal waste, explain under "additional information" and skip the remaining questions in this section. These questions are designed only for small quantity handlers of universal waste. | <input type="checkbox"/> | <input type="checkbox"/> | |
| 9. If the facility manages mercury-containing equipment, do they remove mercury-containing ampules from equipment?
If yes, are the requirements of 40 CFR 273.13(c)(2) met? (These include using secondary containment during the removal, having a mercury spill kit available, training employees, and other requirements.) 40 CFR 273.13(c)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

YES NO NA V#

10. Are all universal wastes managed in closed containers that are structurally sound, adequate to prevent breakage, compatible with the contents of the container, lack evidence of leakage, spillage, or damage that could cause leakage under reasonably foreseeable conditions?

- a. Batteries (only damaged or leaking batteries must be contained) **40 CFR 273.13(a)(1)**
 b. Pesticides **40 CFR 273.13(b)(1)**
 c. Mercury-containing equipment **40 CFR 273.13(c)(1)**
 d. Lamps **40 CFR 273.13(d)(1)**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Is each container (or unit if not containerized) marked appropriately with one of the following phrases (substitute the appropriate universal waste for the blank)?:

- "Universal Waste-_____", or "Waste ____" or "Used ____"?
 a. Batteries (only damaged or leaking batteries must be contained) **40 CFR 273.14(a)**
 b. Pesticides **40 CFR 273.14(c)** Note: cannot use the words "Used Pesticides"
 1. Is the original pesticide label or other approved label, also present?
 c. Mercury-containing equipment (the word "thermostat" can be substituted for the words "containing equipment") **40 CFR 273.14(d)**
 d. Lamps **40 CFR 273.14(e)**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Can the accumulation time (date became a waste or from receipt date) be demonstrated by date on container, date in accumulation area, date on individual waste items, inventory system, or other method? **40 CFR 273.15(c)**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

13. Have employees been trained on proper management of universal waste? **40 CFR 273.16**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

14. Has there been a release of universal waste at this facility?
 If yes, was it cleaned up and a proper waste determination made on the cleaned up material? **40 CFR 273.17(b)**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Is universal waste sent to another universal waste handler or a destination facility? **40 CFR 273.18(a)**

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------

- a. Has a shipment sent by this handler ever been rejected? (if yes, explain in additional information section.)
 b. Has a shipment been sent to a foreign destination? (if yes, explain in additional information section.)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: Small quantity handlers are not required to keep records of shipments of universal waste.

GENERATOR REQUIREMENTS

YES NO NAV#

16. Is the CESQG recycling, treating, or disposing of hazardous waste on-site in an acceptable manner? **40 CFR 261.5(g)**

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
--------------------------	--------------------------	-------------------------------------

If yes, describe _____
 (If described on the waste stream table, don't repeat here.)

17. If the CESQG is accumulating less than 55 lbs (25 kgs) of hazardous waste on-site, is the CESQG sending this waste off-site for treatment, storage, or disposal according to? **40 CFR 261.5(g)**

<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
--------------------------	--------------------------	-------------------------------------

If yes, describe _____
 (If described on the waste stream table, don't repeat here.)

(If Non-Accumulating CESQG, stop here)

- | | YES | NO | NA | V# |
|---|-------------------------------------|--------------------------|-------------------------------------|----|
| 18. If the CESQG is accumulating 55 lbs (25 kgs) or more of hazardous waste, is the CESQG sending waste off-site for treatment, storage, or disposal, to a TSD or some other approved waste management facility (HHW)? KAR 28-31-262a(f)(2)(B) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 19. Does generator package, label (flammable liquid, poison, etc.), and mark (consignee's or consignor's name and address, etc.) waste in accordance with the requirements outlined in 49 CFR Parts 172, 173, 178, and 179 (DOT)?
40 CFR 262.30 (package), 40 CFR 262.31 (label), 40 CFR 262.32(a) and (b) (mark) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 20. Does the generator only use a transporter who has registered with KDHE and obtained an EPA Identification Number? KAR 28-31-262a(a)(2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |

CONTAINER MANAGEMENT REQUIREMENTS

NOTE: SAA refers to Satellite Accumulation Area. SAAs do not apply to CESQGs, whose containers must all meet storage requirements.

- | | | | | |
|---|-------------------------------------|-------------------------------------|--------------------------|---|
| 21. For the SAA, is 55-gallons or less of each waste stream accumulated at or near the point of generation, in one container, which is under the control of the operator of the process generating that waste? KAR 28-31-262(c)(6) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 22. Is each container managed as a storage container within three days of no longer meeting the definition of a satellite container? 40 CFR 262.34(c)(2)
[Note: If this satellite container violation is cited, do not cite storage container violations (weekly inspections and accumulation start date) for the same containers.] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 23. Is the accumulation start date marked on each <u>storage</u> container? 40 CFR 262.34(a)(2) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 24. Is each container clearly marked with the words "Hazardous Waste"?
40 CFR 262.34(a)(3) [storage] or KAR 28-31-262(c)(7) [SAA] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 25. Are all containers holding hazardous waste in good condition? 40 CFR 265.171 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 26. Are all containers holding hazardous waste compatible with the contents? 40 CFR 265.172 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 27. Are all containers holding hazardous waste closed except when necessary to add or remove waste? 40 CFR 265.173(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 28. Does the <u>CESQG</u> or <u>KSQG</u> conduct inspections at least every 31 days looking for signs of deterioration and leaks in containers in <u>storage</u> ?
KAR 28-31-262a(f)(2)(A) [CESQG] or KAR 28-31-262a(e)(2) [KSQG] | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Or
Does the <u>SQG</u> or <u>LQG</u> conduct weekly inspections of areas where containers are stored for signs of leakage and/or deterioration caused by corrosion or other factors?
40 CFR 265.174 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 29. If the answer to question 28 was yes, are these inspections documented in a log that includes complete date and time of inspection, name of inspector, notations of observations, and date and nature of remedial actions? 40 CFR 265.15(d) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | X |

YES NO NA V#

30. Incompatible wastes:
- If incompatible wastes or incompatible wastes and materials were placed in the same container, were the requirements of 40 CFR 265.17(b) complied with? **40 CFR 265.177(a)** ☒ ☐
 - If hazardous waste was placed in an unwashed container that previously held incompatible waste or material, were the requirements of 40 CFR 265.17(b) complied with? **40 CFR 265.177(b)** ☒ ☐
 - If storage containers of hazardous waste are incompatible with any waste or other materials stored nearby, are the containers separated from the other materials by means of a dike, berm, wall or other means? **40 CFR 265.177(c)** ☒ ☐
31. Are storage containers holding ignitable or reactive waste(s) located at least 50 feet (15 meters) from the generator's property line? (LQG Only) **40 CFR 265.176** ☒ ☐ ☐
32. Are storage containers currently meeting all AA, BB, and CC requirements (LQG Only) **40 CFR 265.178** ☒ ☐ ☐
33. If the CESQG or KSQG is accumulating (including SAAs) 2,200 lbs (1,000 kgs) or more of hazardous waste, check yes and continue with SQG generator requirements. ☐ ☒
34. If the CESQG or KSQG or SQG is accumulating (including SAAs) 2.2 lbs (1 kgs) or more of acutely hazardous waste, check yes and continue with LQG generator requirements. ☐ ☒

(If Accumulating CESQG, <2,200 lbs, stop here)

35. Is the SQG storing 13,200 lbs (6,000 kgs) or less of hazardous waste for 180 days or less (270 days if transporting waste more than 200 highway miles)? **40 CFR 262.34(d)** ☐ ☐ ☒
36. Is the LQG storing hazardous waste for 90 days or less? **40 CFR 262.34(a)** ☒ ☐ ☐

REPORTING AND RECORDKEEPING

37. Has the generator (KSQG, SQG, and LQG) submitted an annual monitoring fee and report to KDHE indicating their current generator status on a form provided by the department? (LQGs are required to pay the annual fee every year, but this report is only required to be submitted in the odd years when the biennial report is not submitted.) **KAR 28-31-262a(b)** (if neither report nor fee were submitted) **KAR 28-31-10(a)** (if only fee is missing) ☒ ☐ ☐
38. If yes to number 37, was a copy of the report kept for a minimum of 3 years after the date of the signature on the report? **KAR 28-31-262a(b)(4)** ☒ ☐ ☐
39. Has the LQG submitted biennial report(s) to KDHE by March 1 of even years? **40 CFR 262.41(a)** ☒ ☐ ☐
 a. Does the LQG retain a copy of the biennial report for three years? **40 CFR 262.40(b)** ☒ ☐ ☐
40. If the generator has exported/imported hazardous waste to/from a foreign source, did they comply with the requirements of **40 CFR 262.53(a)**, **40 CFR 262.54**, and/or **40 CFR 262.60(a)**? ☐ ☐ ☒

If hazardous waste was exported or imported to/from a foreign source, please describe under "additional information".

EMERGENCY PREPAREDNESS AND TRAINING REQUIREMENTS FOR KSQGs AND SQGs

YES NO NA V#

If the KSQG or SQG is not accumulating hazardous waste on-site, skip to question 47.

41. Has the KSQG or SQG designated at least one employee as an emergency coordinator and are they on the premises or available to respond to an emergency by reaching the facility within a short period of time (30 minutes)? **40 CFR 262.34(d)(5)(i)** ☐ ☐
42. Is the emergency coordinator or his/her designee prepared to respond to any emergencies (fires, spills, or releases) that arise? **40 CFR 262.34(d)(5)(iv)** ☐ ☐
43. Is the following information posted next to at least one telephone which is accessible with little or no delay in an emergency? **40 CFR 262.34(d)(5)(ii)** ☐ ☐
(note: cite 262.34(a)(5)(ii) if no information is posted)
- a. Name and telephone number of emergency coordinator(s)? **40 CFR 262.34(d)(5)(ii)(A)** ☐ ☐
- b. Location of fire extinguishers and spill-control material, and if available, fire alarms? **40 CFR 262.34(d)(5)(ii)(B)** ☐ ☐
- c. Telephone number of fire department unless facility has a direct alarm (911 is acceptable)? **40 CFR 262.34(d)(5)(ii)(C)** ☐ ☐
44. If the facility has no telephone (land line), and relies solely on cell phones:
- a. Is the information required in 42a through 42c posted on wall so that it can be readily seen by employees? **KAR 28-31-262(c)(8)** ☐ ☐
- b. Have the phone numbers required in 42a and 42c been programmed into the cell phones of management personnel? **KAR 28-31-262(c)(8)** ☐ ☐
45. Has the KSQG or SQG established a hazardous waste management training program meeting the requirements of 40 CFR 262.34(d)(5)(iii)? ☐ ☐
KAR 28-31-262a(d)(1) (SQG) or KAR 28-31-262a(e)(4) (KSQG)
- a. Are new personnel trained within six months after their employment or placement to a new position? **KAR 28-31-262a(d)(1)(A) (SQG) or KAR 28-31-262a(e)(4)(A) (KSQG)** ☐ ☐
- b. After initial training, are employees trained on an annual basis? **KAR 28-31-262a(d)(1)(B) (SQG) or KAR 28-31-262a(e)(4)(B) (KSQG)** ☐ ☐
- c. Was a record kept of the name of each employee trained, the date of the training, and the topics covered in the training **KAR 28-31-262a(d)(1)(C) (SQG) or KAR 28-31-262a(e)(4)(C) (KSQG)** ☐ ☐
- d. Was the record of training kept for three years from the date of the training? **KAR 28-31-262a(d)(1)(D) (SQG) or KAR 28-31-262a(e)(4)(D) (KSQG)** ☐ ☐
- e. If the KSQG or SQG relies on cell phones, have employees managing hazardous waste been trained on the locations of these postings? **KAR 28-31-262(c)(8)** ☐ ☐

PERSONNEL TRAINING FOR LQGs

YES NO NA V#

46. Has the LQG established a hazardous waste management training program? **40 CFR 265.16(a)(1)** ☒ ☐
- a. Is the program directed by a person trained in hazardous waste management? **40 CFR 265.16(a)(2)** ☒ ☐
- b. Are new personnel trained within six months after their employment or placement to a new position? **40 CFR 265.16(b)** ☒ ☐
- c. Are new employees supervised until training is completed? **40 CFR 265.16(b)** ☒ ☐

- | | YES | NO | NA | V# |
|---|-------------------------------------|--------------------------|----|----|
| d. After initial training, are employees trained on an annual basis? 40 CFR 265.16(c) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| e. Does the generator maintain the following documents and records: 40 CFR 265.15(d) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 1. Job title for each position related to hazardous waste management and the name of the employee filling each job? 40 CFR 265.16(d)(1) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 2. Written job description for each position? 40 CFR 265.16(d)(2) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 3. Description of type and amount of both introductory and continuing training to be given to each person? 40 CFR 265.16(d)(3) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 4. Records of training or job experience completed by facility personnel? 40 CFR 265.16(d)(4) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 5. Are training records kept until closure of the facility (for current employees) and for three years from last date of employment (past employees)? 40 CFR 265.16(e) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |

MANIFEST REQUIREMENTS

47. If a contractual agreement is used in place of manifesting, (KSQG and SQG only)
- | | | | |
|--|--------------------------|--------------------------|-------------------------------------|
| a. Does the contractual agreement include the type of waste and frequency of shipments? 40 CFR 262.20(e)(1)(i) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b. Is the vehicle used to transport the waste owned and operated by the reclaimer of the waste? 40 CFR 262.20(e)(1)(ii) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| c. Is a copy of the agreement kept for a period of at least three years after termination of agreement? 40 CFR 262.20(e)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
48. If required, is a hazardous waste manifest used? **40 CFR 262.20(a)**
- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|-------------------------------------|--------------------------|--------------------------|
49. If yes to number 48, does the manifest include the following (numbers correspond to the appropriate section of the manifest)? **40 CFR 262.20(a)**
- | | | | |
|--|-------------------------------------|--------------------------|--------------------------|
| 1. Generator EPA identification number (12-digit) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 2. Number of pages? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 3. Emergency response phone number?
(may be entered after manifest item 9b only if different emergency response number(s) applies to different wastes on the manifest) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 4. Manifest Tracking Number (must be pre-printed) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 5. Generator's name, mailing address, phone number, and site address | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 6. Transporter 1 company name and EPA ID number | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 7. Transporter 2 company name and EPA ID number | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If more than 2 transporters were used, was a continuation sheet used? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Designated facility name, site address, phone number, and EPA ID number? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9. US DOT description (including proper shipping name, hazardous class or division, ID number, and packing group) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 9a. If hazardous and non-hazardous materials/wastes are listed on separate lines in Item 9b, is an "x" marked in item 9a next to the corresponding hazardous materials/wastes? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Number and type of containers? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 11. Total quantity of waste? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 12. Unit of measure (weight or volume)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 13. Waste codes (up to 6 can be entered)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 14. Special handling instructions (if applicable)? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Generator's/offoror's printed/typed name, signature, and date? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Does the manifest apply to international shipment?
If yes, did the primary exporter comply with all applicable requirements? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Printed name, signature and dates received by transporter 1? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 18. Printed name, signature and date received by transporter 2? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

- | | YES | NO | NA | V# |
|--|-------------------------------------|--------------------------|-------------------------------------|----|
| 50. Does the generator retain a copy of each initial manifest signed and dated by both generator and initial transporter until the copy signed and dated by the designated facility is received? 40 CFR 262.40(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 51. Does the generator retain a copy of each manifest for three years that was signed and dated by a representative of the designated facility? 40 CFR 262.40(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 52. If the LQG did not receive a copy of the manifest within 35 days that had been signed by the designated facility, did they contact the transporter and/or designated facility to determine the status of their hazardous waste? 40 CFR 262.42(a)(1) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| a. If the LQG was unable to locate their waste through contact with the transporter and/or designated facility, and still had not received a copy of the manifest within 45 days, did they file an exception report with KDHE? 40 CFR 262.42(a)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 53. If the KSQG or SQG did not receive a copy of the manifest within 60 days that had been signed by the designated facility, did they submit to KDHE a legible copy of the manifest with an explanation of the situation? 40 CFR 262.42(b) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

LAND DISPOSAL RESTRICTION REQUIREMENTS

- | | YES | NO | NA | V# |
|---|-------------------------------------|--------------------------|-------------------------------------|----|
| 54. If the generator's waste is not subject to the Land Disposal Restrictions regulations, please explain why: _____ | | | | |
| 55. If the SQG or LQG sent waste meeting or not meeting the treatment standards to an off-site TSDF, did the generator provide a one-time written notice for each different waste stream?
40 CFR 268.7(a)(2) (not meeting treatment standards) or
40 CFR 268.7(a)(3) (meeting treatment standards) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| a. Did the notice include the following (mark each that it includes): | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| <input checked="" type="checkbox"/> EPA hazardous waste numbers (waste codes); | | | | |
| <input checked="" type="checkbox"/> manifest number for first shipment of waste; | | | | |
| <input checked="" type="checkbox"/> Constituents of concern for F001-F005, F039, and underlying hazardous Constituents in characteristic wastes (unless the waste will be treated and monitored for all constituents. If all constituents will be treated and monitored, there is no need to put them all on the LDR notice) | | | | |
| <input checked="" type="checkbox"/> applicable wastewater or non-wastewater category and subdivisions | | | | |
| <input checked="" type="checkbox"/> waste analysis data (if available) | | | | |
| b. If the generator chose not to make the determination of whether his/her waste must be treated, did he/she provide a one-time written notice that includes EPA hazardous waste numbers (waste codes); manifest number of the first shipment; and states "This hazardous waste may or may not be subject to the LDR treatment standards. The treatment facility must make the determination."? 40 CFR 268.7(a)(2) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| c. If the waste met the treatment standards, did the notice include the required certification statement? 40 CFR 268.7(a)(3) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 56. If the KSQG, SQG, or LQG treated waste in tanks or containers to meet applicable treatment standards: | | | | |
| a. Did the generator have a written waste analysis plan on-site describing procedures used to comply with the treatment standards? 40 CFR 268.7(a)(5) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| b. If the generator sent the treated waste off-site, did the generator provide a notice and signed certification statement with the initial shipment?
40 CFR 268.7(a)(5)(iii) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

- | | YES | NO | NA | V# |
|---|-------------------------------------|--------------------------|-------------------------------------|----|
| 57. Has the SQG or LQG retained copies of all notices, certifications, waste analysis data, and other documents for at least 3 years from the last date the corresponding waste was last managed on-site or shipped off-site?
40 CFR 268.7(a)(8) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 58. If the SQG or LQG is managing a labpack and using with the initial shipment of waste the alternate treatment standards found at 40 CFR 268.42(c), did they provide a notice that includes the required certification statement? 40 CFR 268.7(a)(9) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| 59. If the SQG or LQG claims that their characteristic waste, including all applicable underlying hazardous constituents, is no longer hazardous, does the generator maintain a current, signed, one-time notice in their files? 40 CFR 268.9(d) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

Note: If a generator's waste is subject to any Land Disposal Restriction regulations not covered above, then please discuss these situations under "additional information".

PREPAREDNESS AND PREVENTION REQUIREMENTS

- | | YES | NO | NA | V# |
|--|-------------------------------------|-------------------------------------|--------------------------|----|
| 60. Has the generator maintained and operated the facility to minimize the possibility of a fire, explosion, or any unplanned sudden or non-sudden release of hazardous waste or hazardous waste constituents? 40 CFR 265.31 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 61. If appropriate , based upon the nature and quantity of each waste generated and stored at the facility, is the facility equipped with: | | | | |
| a. Internal communications or alarm system easily accessible in case of emergency?
40 CFR 265.32(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| b. Telephone or hand-held two-way radio capable of summoning emergency assistance from local police departments, fire departments, or State or local emergency response teams? 40 CFR 265.32(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| c. Portable fire extinguishers, fire control equipment, spill control equipment, and decontamination equipment? 40 CFR 265.32(c) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| d. Water of adequate volume and pressure to supply hose streams, or foam producing equipment, automatic sprinklers, or water spray systems? 40 CFR 265.32(d) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 62. Is the equipment (60a-60c above) tested and maintained to ensure its proper operation?
40 CFR 265.33 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| 63. Do personnel have immediate access to an internal alarm or emergency communication device, either directly or through visual or voice contact with another employee, when handling hazardous waste (unless such a device is not required under (40 CFR 265.32)?
40 CFR 265.34(a) and/or 40 CFR 265.34(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| 64. Does a check of the facility show sufficient aisle space to allow unobstructed movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment, unless aisle space is not needed for any of these purposes? 40 CFR 265.35 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

65. **As appropriate**, for each type of waste handled, has the generator attempted to make the following arrangements:
- a. Familiarized the local emergency authorities with the facility layout, properties and hazards of each waste handled, locations of workers, entrances to facility roads, and possible evacuation routes? **40 CFR 265.37(a)(1)** ☒ ☐ ☐
 - b. Designated one authority where more than one police or fire department might respond to an emergency? **40 CFR 265.37(a)(2)** ☒ ☐ ☐
 - c. Made agreements with state emergency response teams, emergency response contractors, and equipment suppliers? **40 CFR 265.37(a)(3)** ☒ ☐ ☐
 - d. Familiarized local hospitals with the properties of hazardous waste handled and types of injuries or illnesses which could result from fires, explosions, or releases at the facility? **40 CFR 265.37(a)(4)** ☒ ☐ ☐
66. In cases where state or local authorities decline to enter into such arrangements, is the refusal documented? **40 CFR 265.37(b)** ☐ ☐ ☒

(If KSQG or SQG, stop here)

CONTINGENCY PLAN FOR LQGs

- | | YES | NO | NA | V# |
|--|-------------------------------------|-------------------------------------|-------------------------------------|----|
| 67. Does the generator have a contingency plan? 40 CFR 265.51(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| If yes, | | | | |
| a. Does the plan list the name, home address, and phone numbers (home and office) of each designated emergency coordinator in the order in which they should be contacted? 40 CFR 265.52(d) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| b. Is an emergency coordinator available at all times? 40 CFR 265.55 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| c. Does the plan describe emergency actions facility personnel must take to respond to fires, explosions, or releases of hazardous waste or hazardous constituents? 40 CFR 265.52(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| d. Does the plan describe arrangements made with police, fire departments, hospitals, contractors, or any emergency response agency? 40 CFR 265.52(c) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| e. Does the plan include an up to date list of all emergency equipment at the facility, its location, a physical description of each item on the list, and a brief outline of the capabilities of each item? 40 CFR 265.52(e) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| f. Does the plan include an evacuation plan for facility personnel that describes signals to be used and evacuation routes? 40 CFR 265.52(f) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| g. Has the plan been amended, if the following occurred: 40 CFR 265.54 | | | | |
| 1. Applicable regulations were revised? 40 CFR 265.54(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 2. The plan failed in an emergency? 40 CFR 265.54(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 3. There is an applicable change to the facility? 40 CFR 265.54(c) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| 4. The list of emergency coordinators changes? 40 CFR 265.54(d) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | | |
| 5. The list of emergency equipment changes? 40 CFR 265.54(e) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| h. Is a copy of the plan and any revisions maintained at the facility? 40 CFR 265.53(a) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| i. Have copies of the plan and any revisions been provided to the police and fire departments, hospitals, and any emergency response agency that may respond to an emergency? 40 CFR 265.53(b) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| j. If implementation of the plan has been required at the facility, did the generator submit a written report on the incident to the KDHE within 15 days after the incident? 40 CFR 265.56(i) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |

**HAZARDOUS WASTE TREATMENT/STORAGE/DISPOSAL (TSD)
COMPLIANCE INSPECTION CHECKLIST**

Activity at Site

Treatment

- ☐ Chem/Phys/Bio Treatment
- ☐ Containment Building
- ☐ Filtration

- ☐ Incineration
- ☐ Recycling/Recovery
- ☐ Reprocessing

- ☐ Thermal Treatment
- ☐ Volume Reduction
- ☐ Other _____

Storage

- ☐ Containment Building
- ☒ Drums
- ☐ Pile

- ☐ Surface Impoundment
- ☐ Tank(s) (complete applicable checklist)

- ☐ Other _____

Disposal

- ☐ Deep Well Injection
- ☐ Incineration

- ☐ Landfill
- ☐ Land Treatment

- ☐ Surface Impoundment
- ☐ Other _____

Comments:

Waste Analysis Plan (DOGS)

	YES	NO	NA
1. Does facility maintain a copy of its waste analysis plan at the facility? [§264.13(b)/265.13(b)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes, does the plan include:			
A. Parameters for which each hazardous waste will be analyzed and rationale for the selection of these parameters? [§264.13(b)(1)/265.13(b)(1)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. Test methods which are used to test for these parameters? [§264.13(b)(2)/265.13(b)(2)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. Sampling method used to obtain sample? [§264.13(b)(3)/265.13(b)(3)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. Frequency with which the initial analysis will be reviewed or repeated to ensure the analysis is current? [§264.13(b)(4)/265.13(b)(4)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
E. For off-site facilities, the waste analyses that generators have agreed to supply? [§264.13(b)(5)/265.13(b)(5)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
F. For off-site facilities, the procedures which are used to inspect and analyze each movement of hazardous waste received to ensure that it matches the identify of the waste designated on the manifest? [§264.13(c)/265.13(c)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Security (DOGS)

	YES	NO	NA
2. Does the facility consider itself exempt from the security requirements as provided in §264.14(a)(1)&(2)/265.14(a)(1)&(2)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
If no,			
a. Does the facility provide either of the following:			
A. A 24-hour surveillance system (TV monitoring or guards)? [§264.14(b)(1)/265.14(b)(1)]; OR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. An artificial or natural barrier (fence, fence and cliff combination) and a means to control entry (attendant, TV monitoring, locked entrance, controlled roadway access)? [§264.14(b)(2)/265.14(b)(2)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Has the facility posted warning signs at each entrance to the active portion of the facility, and at other locations, in sufficient numbers to be seen from any approach to the active portion? [§264.14(c)/265.14(c)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

General Inspection Requirements (DOGS)

	YES	NO	NA
3. Does the owner/operator follow a written schedule at the facility for inspecting monitoring equipment, safety and emergency equipment, security devices, and operating and structural equipment? [§264.15(b)(1)/265.15(b)(1)]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Does the owner/operator keep the written inspection schedule at the facility? [§264.15(b)(2)/265.15(b)(2)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Does the written inspection schedule identify the types of problems which are to be looked for during the inspections? [§264.15(b)(3)/265.15(b)(3)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does the owner/operator remedy any deterioration or malfunction of equipment or structures noted during the inspection? [§264.15(c)/265.15(c)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the owner/operator record inspections in an inspection log or summary which contains the date and time of inspection, name of inspector, notation of observations, and the date and nature of remedial action? [§264.15(d)/265.15(d)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Personnel Training (DOGS)

- | | YES | NO | NA |
|--|-------------------------------------|--------------------------|--------------------------|
| 8. Does the owner/operator maintain, <u>at the facility</u> , the following documents and records:
[§264.16/265.16] | | | |
| a. Job title for each position related to hazardous waste management and the name of the employee filling each job? [§264.16(d)(1)/265.16(d)(1)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Written job description for each position?
[§264.16(d)(2)/265.16(d)(2)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Written description of type and amount of training to be given each person?
[§264.16(d)(3)/265.16(d)(3)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Records of training given to facility personnel?
[§264.16(d)(4)/265.16(d)(4)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Requirements for Ignitable, Reactive, or Incompatible Wastes (DOGS)

- | | YES | NO | NA |
|---|-------------------------------------|-------------------------------------|--------------------------|
| 9. Does the facility handle ignitable or reactive wastes? [§264.17(a)/265.17(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, | | | |
| a. Is the waste separated and confined from sources of ignition or reaction, sparks, spontaneous ignition and radiant heat?
[§264.17(a)/265.17(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are smoking and open flames confined to specially designated locations?
[§264.17(a)/265.17(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are "No Smoking" signs posted in hazard areas?
[§264.17(a)/265.17(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Does a check of the areas used to handle ignitable or reactive wastes show: | | | |
| A. Evidence of heat generation from interaction of incompatible wastes?
[§264.17(b)(1)/265.17(b)(1)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Evidence of uncontrolled toxic mists, fumes, dusts, or gases in sufficient quantities to threaten human health or the environment?
[§264.17(b)(2)/265.17(b)(2)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| C. Evidence of uncontrolled flammable fumes or gases in sufficient quantities to pose a risk of fire or explosion? [§264.17(b)(3)/265.17(b)(3)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| D. Evidence of any leakage from or corrosion of containers?
[§264.17(b)(4)/265.17(b)(4)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10. For permitted facilities only, when required to comply with paragraph (a) or (b) of 264.17/265.17, has the owner/operator documented that compliance?
[§264.17(c)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Preparedness and Prevention (DPP)

	YES	NO	NA
11. Does an inspection of the facility show any evidence of fire, explosion, or contamination? [§264.31/265.31]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12. If applicable to the facility, is the facility equipped with:			
a. Internal communication or alarm system easily accessible in case of emergency? [§264.32(a)/265.32(a)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Telephone or hand-held two-way radio capable of summoning emergency response assistance from local police departments, fire departments, or State or local emergency response teams? [§264.32(b)/265.32(b)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Portable fire extinguishers, fire control, spill control equipment, and decontamination equipment? [§264.32(c)/265.32(c)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Water of adequate volume for hose streams, foam producing equipment, sprinklers, etc? [§264.32(d)/265.32(d)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Is the equipment (mentioned above) tested and maintained to ensure its proper operation? [§264.33/265.33]	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14. Whenever hazardous waste is being poured, mixed, spread, or otherwise handled:			
a. Do all personnel involved in the hazardous waste activity have immediate access to an internal alarm or emergency communication device, either directly or through visual or voice contact with another employee? [§264.34(a)/265.34(a)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Does an employee who is alone on the premises while the facility is operating have immediate access to a device capable of summoning external emergency assistance? [§264.34(b)/265.34(b)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Does a check of the facility show sufficient aisle space to allow unobstructed movement of personnel and equipment? [§264.35/265.35]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. As appropriate for the type(s) of waste handled, has the owner/operator:			
a. Made arrangements with the local emergency authorities to familiarize them with the layout of the facility, properties of wastes handled and associated hazards, places where facility personnel normally work, entrances to roads inside the facility, and possible evacuation routes? [§264.37(a)(1)/265.37(a)(1)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Designated one primary authority in areas where more than one police and fire department might respond? [§264.37(a)(2)/265.37(a)(2)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Made agreements with state emergency response teams, emergency response contractors, and equipment suppliers? [§264.37(a)(3)/265.37(a)(3)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Familiarized local hospitals, with the properties of hazardous waste(s) handled and types of injuries that could result from fires, explosions, or releases at the facility? [§264.37(a)(4)/265.37(a)(4)]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. In cases where state or local authorities decline to enter into such arrangements, is the refusal entered in the operating record? [§264.37(b)/265.37(b)]	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Contingency Plan and Emergency Procedures (DCP)

- | | YES | NO | NA |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 18. Is a contingency plan maintained at the facility and have copies been provided to outside agencies that may be called upon to provide emergency services? [§264.53(a)/265.53(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, does the plan: | | | |
| A. Describe emergency actions facility personnel must take to respond to fires, explosions, or releases of hazardous waste? [§264.52(a)/265.52(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Describe arrangements agreed to by local police departments, fire departments, hospitals, contractors, and State and local emergency response teams? [§264.52(c)/265.52(c)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. List the name(s), home address(es), and phone number(s) of designated emergency coordinator(s) in the order in which they should be contacted? [§264.52(d)/265.52(d)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Include a list of all emergency equipment at the facility, its location, a physical description of each item on the list, and a brief outline of its capabilities? [§264.52(e)/265.52(e)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Include an evacuation plan for facility personnel that describes signals and evacuation routes? [§264.52(f)/265.52(f)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. Is an emergency coordinator available at all times? [§264.55/265.55] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. Has implementation of the plan been required at the facility? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, was the facility required to submit a written report on the incident to the KDHE? | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| A. If yes, was the written report submitted? [§264.56(j)/265.56(j)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Manifest System, Recordkeeping, and Reporting (DMR)

- | | YES | NO | NA |
|---|-------------------------------------|-------------------------------------|-------------------------------------|
| 21. Does the facility receive waste from off-site? [§264.71/265.71] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, does the owner/operator: | | | |
| A. Sign and date each copy of the manifest? [§264.71(a)(1)/265.71(a)(1)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Note any significant discrepancies in the manifest on each copy of the manifest? [§264.71(a)(2)/265.71(a)(2)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Give a signed copy to the transporter? [§264.71(a)(3)/265.71(a)(3)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Send a signed copy of the manifest to the generator within 30 days of the delivery? [§264.71(a)(4)/265.71(a)(4)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Retain a copy of the manifest for at least three years from the date of delivery? [§264.71(a)(5)/265.71(a)(5)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. Does the facility receive any waste from a rail or water (bulk shipment transporter)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, is the shipment accompanied by a manifest or shipping paper containing the appropriate information? [§264.71(b)/265.71(b)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, does the owner/operator: | | | |
| A. Does the owner/operator sign and date the shipping paper? [§264.71(b)/265.71(b)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| B. Note any significant discrepancies in the shipping paper? [§264.71(b)(2)/265.71(b)(2)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| C. Immediately give the rail or water transporter at least one copy of the shipping paper? [§264.71(b)(3)/265.71(b)(3)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| D. Send a signed copy of the shipping paper to the generator within 30 days of the delivery? [§264.71(b)(4)/265.71(b)(4)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| E. Retain a copy of the shipping paper? [§264.71(b)(5)/265.71(b)(5)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

23. Has the facility received any shipments of waste that were inconsistent with the manifest? [§264.72/265.72] ☐ ☒ ☐
- a. If yes, was an attempt made to reconcile the discrepancy with the generator and transporter? [§264.72(b)/265.72(b)] ☐ ☐ ☒
- A. If the discrepancy was not reconciled within 15 days, did the owner/operator immediately notify the KDHE? [§264.72(b)/265.72(b)] ☐ ☐ ☒
24. Does the owner/operator keep a written operating record at the facility? [§264.73(a)/265.73(a)] ☒ ☐ ☐
- a. If yes, does the operating record include:
- A. A description and the quantity of each hazardous waste received, and method(s) and date(s) of its treatment, storage, and disposal? [§264.73(b)(1)/265.73(b)(1)] ☒ ☐ ☐
- B. The location of each hazardous waste within the facility and the quantity at each location? [§264.73(b)(2)/265.73(b)(2)] ☒ ☐ ☐
- C. Records and results of waste analyses and waste determinations? [§264.73(b)(3)/265.73(b)(3)] ☒ ☐ ☐
- D. Reports and details of incidents requiring implementation of the contingency plan? [§264.73(b)(4)/265.73(b)(4)] ☒ ☐ ☐
- E. Records and results of required inspections? [§264.73(b)(5)/265.73(b)(5)] ☒ ☐ ☐
- F. Monitoring, testing, or analytical data? [§264.73(b)(6)/265.73(b)(6)] ☒ ☐ ☐
- G. Notices to generators that the facility has the appropriate permit(s) for and will accept the waste the generator is shipping? [§264.73(b)(7)/265.73(b)(7)] ☒ ☐ ☐
- H. Closure cost estimates (and for disposal facilities, post-closure cost estimates)? [§264.73(b)(8)/265.73(b)(8)] ☒ ☐ ☐
- I. Certification by the permittee, at least annually, that a hazardous waste minimization program is in place at the facility? [§264.73(b)(9)/265.73(b)(9)] ☒ ☐ ☐
- J. As applicable, documentation that the Land Disposal Requirements have been met? [§264.73(b)(10-16)/265.73(b)(10-16)] ☒ ☐ ☐
25. Does the owner/operator prepare and submit a copy of a biennial report to the KDHE by March 1 of each even numbered year? [§264.75/265.75] ☒ ☐ ☐
- a. If yes, does the report include:
- A. The EPA identification number, name, and address of the facility? [§264.75(a)/265.75(a)] ☒ ☐ ☐
- B. The calendar year covered by the report? [§264.75(b)/265.75(b)] ☒ ☐ ☐
- C. A description and the quantity of each hazardous waste received during the year? [§264.75(d)/265.75(d)] ☒ ☐ ☐
- D. The method of treatment, storage, or disposal for each hazardous waste? [§264.75(e)/265.75(e)] ☒ ☐ ☐
- E. The most recent cost estimate and, as applicable, the most recent post-closure cost estimate? [§264.75(g)/265.75(g)] ☒ ☐ ☐
- b. If yes and the facility receives waste from off-site facilities, does the report include:
- A. The EPA identification number of each hazardous waste generator from which the facility received a hazardous waste during the year? [§264.75(c)/265.75(c)] ☒ ☐ ☐
- B. A description and the quantity, listed by the EPA identification number of each generator, of each hazardous waste received during the year? [§264.75(d)/265.75(d)] ☒ ☐ ☐
- c. If yes and the facility receives shipments from foreign generators, does the report include the name and address of the foreign generators? [§264.75(c)/265.75(c)] ☐ ☐ ☒

- d. If yes and the facility is also a generator who treats, stores, and/or disposes of hazardous waste on-site, does the report include a description of:
- A. The efforts undertaken during the year to reduce the volume and toxicity of waste generated? [§264.75(h)/265.75(h)] ☐ ☐ ☒
- B. The changes in volume and toxicity of waste actually achieved during the year in comparison to previous years? [§264.75(i)/265.75(i)] ☐ ☐ ☒
26. Has the facility accepted any waste not accompanied by a manifest or shipping papers? ☐ ☒ ☐
- a. If yes, was the shipment excluded from manifest/shipping paper requirements? ☐ ☐ ☒
- A. If no, did the facility submit an unmanifested waste report to the KDHE within 15 days? [§264.76/265.76] ☐ ☐ ☒

Closure and Post-Closure (DCL)

- | | YES | NO | NA |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 27. Does the owner/operator have a written closure plan for the facility?
[§264.112(a)/265.112(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, does the plan include: | | | |
| A. A description of how and when the facility will be closed?
[§265.112(b)/265.112(b)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. A description of the steps necessary to completely close the facility?
[§264.112(b)(2)/265.112(b)(2)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. An estimate of the maximum inventory of wastes in storage or in treatment at any given time during the facility life? [§264.112(b)(3)/265.112(b)(3)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. A description of the steps needed to decontaminate facility equipment at the time of closure? [§264.112.(b)(4)/265.112(b)(4)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. A description of the activities necessary to ensure that all closure satisfy the closure performance standards?
[§265.112(b)(5)/265.112(b)(5)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| F. An estimate of the expected year of closure and a schedule for final closure which includes the total time required to close the facility and the time required for intervening closure activities which allow tracking closure progress?
[§264.112(b)(6)/265.112(b)(6)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28. Is the facility a disposal facility? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, does the owner/operator have a written post-closure plan?
[§264.118(a)/265.118(a)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| If yes, does the plan include: | | | |
| A. Ground-water monitoring activities and frequencies at which they will be performed? [§264.118(c)(1)/265.118(c)(1)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| B. Maintenance activities and frequencies at which they will be performed to ensure the integrity of the cap and containment structures where applicable, and the function of the monitoring equipment? [§264.118(c)(2)/265.118(c)(2)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| C. The name, address, and phone number of the person or office to contact during the post-closure period? [§264.118(c)(3)/265.118(c)(3)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

Financial Requirements (DFR)

- | | YES | NO | NA |
|--|-------------------------------------|-------------------------------------|-------------------------------------|
| 29. Does the owner/operator have a written estimate of the closure cost?
[§264.142(a)/265.142(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 30. Has the owner/operator established financial assurance for facility closure and notified the KDHE? [§264.143/265.143] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 31. Is the facility a disposal facility? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| a. If yes, has the owner/operator: | | | |
| A. Established a written estimate of the annual cost of post-closure Monitoring and maintenance of the facility?
[§264.144(a)/265.144(a)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| B. Established financial assurance for post-closure care and notified the KDHE ? [§264.145/265.145] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| C. Obtained liability insurance for nonsudden and accident occurrences of at least \$3 million per occurrence with an annual aggregate of at least \$6 million exclusive of legal defense costs?
[§264.147(b)/265.147(b)] | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 32. Has the owner/operator obtained liability insurance for sudden occurrences of at least \$1 million with an aggregate of at least \$2 million exclusive of legal defense costs? [§264.147(a)/265.147(a)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Management of Containers (DMC)

- | | | | |
|--|-------------------------------------|-------------------------------------|--------------------------|
| 33. Are containers presently used to store hazardous waste? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, | | | |
| a. Are the containers in good condition? [§264.171/265.171] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Are the containers compatible with the waste? [§264.172/265.172] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Are all containers holding hazardous waste closed during storage except when necessary to add or remove waste? [§264.173/265.173] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Does owner/operator inspect areas where containers are stored, at least weekly, for signs of leaking containers and for deterioration of the containers and containment system caused by corrosion or other factors? [§264.174/265.174] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Does the storage facility store waste containing free liquids which would require it to have a containment system? [§264.174/265.174] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, | | | |
| A. Is the base free of cracks or gaps and sufficiently impervious to contain leaks, spills, and accumulated precipitation? [§264.175(b)(1)/265.175(b)(1)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| B. Is the base sloped or the containment system otherwise designed and operated to drain and removed liquids?
[§264.175(b)(2)/265.175(b)(2)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Does the containment system have sufficient capacity to contain 10% of the volume of containers or the volume of the largest container, whichever is greater? [§264.175(b)(3)/265.175(b)(3)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Is the containment system designed to prevent run-on or to have sufficient excess capacity in addition to that required in item C above? [§264.175(b)(4)/265.175(b)(4)] | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Are spilled or leaked waste and accumulated precipitation removed in a timely manner as necessary to prevent overflow of the system?
[§264.175(b)(5)/265.175(b)(5)] | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

- f. Does the storage area store containers holding only wastes that do not contain free liquids? ☐ ☒ ☐
 If yes,
- A. Are the containment system requirements of §264.175(b)/265.175(b) met? ☐ ☐ ☒
 If no,
- i. Is the storage area sloped or otherwise designed and operated to drain and remove liquid resulting from precipitation?
 [§264.175(c)(1)/265.175(c)(1)]; OR ☐ ☐ ☒
- ii. Are the containers elevated or otherwise protected from contact with accumulated liquid? [§264.175(c)(2)/265.175(c)(2)] ☐ ☐ ☒
- g. Are containers holding ignitable or reactive waste located at least 50 feet from the facility's property line? [§264.176/265.176] ☒ ☐ ☐
- h. If waste in containers is incompatible with other materials stored nearby, in other containers, piles, open tanks, or surface impoundments, are the containers separated from other materials by means of a dike, berm, wall, or other device? [§264.177(c)/265.177(c)] ☒ ☐ ☐

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
CONFIDENTIALITY NOTICE

Facility Name <i>Clean Harbors Kansas LLC</i>	
Facility Address <i>2549 North New York Avenue Wichita, KS 67219</i>	
Inspector (print) <i>Michael J. Martin</i>	
U.S. EPA, Region VII, 901 N. 5th St., Kansas City, KS 66101	Date <i>10/10/2012</i>

The United States Environmental Protection Agency (EPA) is obligated, under the Freedom of Information Act, to release information collected during inspections to persons who submit requests for that information. The Freedom of Information Act does, however, have provisions that allow EPA to withhold certain confidential business information from public disclosure. To claim protection for information gathered during this inspection you must request that the information be held CONFIDENTIAL and substantiate your claim in writing by demonstrating that the information meets the requirements in 40 CFR 2, Subpart B. The following criteria in Subpart B must be met:

1. Your company has taken measures to protect the confidentiality of the information, and it intends to continue to take such measures.
2. No statute specifically requires disclosure of the information.
3. Disclosure of the information would cause substantial harm to your company's competitive position.

Information that you claim confidential will be held as such pending a determination of applicability by EPA.

I have received this Notice and <u>DO NOT</u> want to make a claim of confidentiality at this time.	
Facility Representative Provided Notice (print) <i>Kent L. Frame</i>	Signature/Date <i>[Signature]</i> <i>18 Oct 2012</i>

I have received this Notice and <u>DO</u> want to make a claim of confidentiality.	
Facility Representative Provided Notice (print)	Signature/Date

Information for which confidential treatment is requested:

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
RECEIPT FOR DOCUMENTS AND SAMPLES

Facility Name	Clean Harbors Kansas LLC
Facility Address	2549 North New York Avenue Wichita, KS 67219

Documents Collected? YES ☒ (list below) NO ☐

Samples Collected? YES ☐ (list below) NO ☒ Split Samples: YES ☐ NO ☐

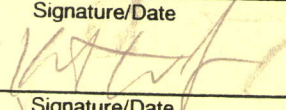
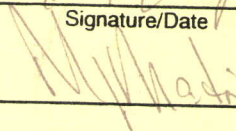
Documents/Samples were: 1) Received no charge ☒ 2) Borrowed ☐ 3) Purchased ☐

Amount Paid: \$ Method: Cash ☐ Voucher ☐ To Be Billed ☐

The documents and samples described below were collected in connection with the administration and enforcement of the applicable statute under which the information is obtained.

Receipt for the document(s) and/or sample(s) described below is hereby acknowledged:

- 1) 2011 Hazardous Waste Report (17 pages)
- 2) 2010 Hazardous Waste Report (7 pages)
- 3) 10/10/2012 Inspection Report (8 pages)
- 4) 2012 Biennial Hazardous Waste Report (3 pages)
- 5) 2012 Uniform Hazardous Waste Manifests (7 pages)
- 6) List of Emergency Coordinators (1 page)
- 7) 01/01/2011 to 10/18/2012 Outbound Compliance Report (3 pages)
- 8) 01/01/2012 to 10/18/2012 Outbound Compliance Report (3 pages)

Facility Representative (print)	Signature/Date
Kent W. Frame	 18 Oct 2012
Inspector (print)	Signature/Date
Michael J. Martin	 10/18/2012
U.S. EPA, Region VII, 901 N. 5th Street, Kansas City, KS 66101	

(rev: 1/20/93)

Notice of Violation Pursuant to Requirements
of the Resource Conservation and Recovery Act (RCRA)

TO: Facility Name: Clean Harbors Kansas LLC
Address: 2549 North New York Avenue
Wichita, KS 67219
EPA ID Number: KSD007246846 Date: 10/18/2012

This notice is provided to call your attention to the following areas of noncompliance with state and federal regulations. This notice does not constitute a compliance order (Administrative Civil Complaint) pursuant to Section 3008 of RCRA and may not be a complete listing of all violations resulting from the inspection.

<u>Citation</u>	<u>Description of Violation</u>
1) KAR 28-31-4	Notification not accurate (Brian Key is no longer the Site Contact).
2) 40 CFR 262.11	Hazardous waste determinations not conducted. Building 'D': (A) one 200ml container labeled "DI H ₂ O" (B) one 200ml container labeled "HCL" (C) four containers of Fluorescent lamps (2 boxes were open). Building D-Maintenance Area (A) 15 containers of various chemicals stored on the floor (PVC cement, spray paint, wood dough, spray adhesive, and furniture polish).

You are requested to submit a written response within **14 calendar days** of receipt of this notice. Your response should include a description of all corrective actions taken and/or a schedule for completing the necessary corrective actions. The response should be submitted to:

U. S. Environmental Protection Agency, Region VII
Environmental Services Division
300 Minnesota Avenue
Kansas City, KS 66101
ATTN: Michael J. Martin

If you have any questions about this Notice or wish to discuss your response, you may call me at (913) 551-7149, or Elizabeth Koesterer (Compliance Officer) at (913) 551-7673.

This Notice prepared by Michael J. Martin Date: 10/18/2012

The undersigned person acknowledges that he/she has received a copy of this Notice and has read same.

Printed Name: Kentley Frany Date: 18 Oct 2012
Signature: [Signature]
Title: Facility General Manager

Notice of Violation Pursuant to Requirements
of the Resource Conservation and Recovery Act (RCRA)

TO: Facility Name: _____
Address: _____
EPA ID Number: _____ Date: _____

This notice is provided to call your attention to the following areas of noncompliance with state and federal regulations. This notice does not constitute a compliance order (Administrative Civil Complaint) pursuant to Section 3008 of RCRA and may not be a complete listing of all violations resulting from the the inspection.

Citation

Description of Violation

_____	(B) One Flammable cabinet storing spilled
_____	black liquid and various chemicals (Axx,
_____	muratic acid, broadleaf herbicide,
_____	charcoal lighter fluid, PVC primer, hydraulic
_____	fluid, spray paint, and 2 cycle engine oil).
3) 40 CFR 262.34(a)(2)	The accumulation start date not marked on
_____	two storage containers of spent PPE located
_____	in Building C.
_____	_____
_____	_____
_____	_____

You are requested to submit a written response within **14 calendar days** of receipt of this notice. Your response should include a description of all corrective actions taken and/or a schedule for completing the necessary corrective actions. The response should be submitted to:

U. S. Environmental Protection Agency, Region VII

ATTN: _____

If you have any questions about this Notice or wish to discuss your response, you may call me at _____, or _____ (Compliance Officer) at _____.

This Notice prepared by Michael J. Martin Date: 10/18/2012

The undersigned person acknowledges that he/she has received a copy of this Notice and has read same.

Printed Name:

Kent W. Frame

Date: 18 Oct 2012

Signature:

[Signature]

Title:

Facility General Manager

Notice of Violation Pursuant to Requirements
of the Resource Conservation and Recovery Act (RCRA)

TO: Facility Name: _____
Address: _____
EPA ID Number: _____ Date: _____

This notice is provided to call your attention to the following areas of noncompliance with state and federal regulations. This notice does not constitute a compliance order (Administrative Civil Complaint) pursuant to Section 3008 of RCRA and may not be a complete listing of all violations resulting from the the inspection.

Citation

Description of Violation

4) 40 CFR 264.15(d)

Records of daily inspections per the Permit not maintained

4) 40 CFR 264.33

Fire protection equipment (Fire extinguishers) not tested and maintained to ensure its proper operation
(A) Seven Fire extinguishers at Building I.
(B) Four Fire extinguishers at Building C.

You are requested to submit a written response within **14 calendar days** of receipt of this notice. Your response should include a description of all corrective actions taken and/or a schedule for completing the necessary corrective actions. The response should be submitted to:

U. S. Environmental Protection Agency, Region VII

ATTN: _____

If you have any questions about this Notice or wish to discuss your response, you may call me at _____, or _____ (Compliance Officer) at _____.

This Notice prepared by Michael J. Martin Date: 10/18/2012

The undersigned person acknowledges that he/she has received a copy of this Notice and has read same.

Printed Name: _____

Signature: _____

Title: _____

Keith W. Frame

Date: 18 Oct 2012

Facility General Manager

Notice of Violation Pursuant to Requirements
of the Resource Conservation and Recovery Act (RCRA)

TO: Facility Name: _____
Address: _____
EPA ID Number: _____ Date: _____

This notice is provided to call your attention to the following areas of noncompliance with state and federal regulations. This notice does not constitute a compliance order (Administrative Civil Complaint) pursuant to Section 3008 of RCRA and may not be a complete listing of all violations resulting from the the inspection.

Citation

Description of Violation

11/10/12
5) 40 CFR 264.54
The Contingency Plan not amended (immediately) with the change to the list of Emergency Coordinators (Brian Kelly is no longer the Emergency Coordinator)

11/10/12
6) 40 CFR 264.175(b)(1)
The Containment area in Building C is not free of cracks and gaps.

11/10/12
7) 40 CFR 264.175(b)(5)
Accumulated precipitation located in Building I Containment areas not removed.

You are requested to submit a written response within **14 calendar days** of receipt of this notice. Your response should include a description of all corrective actions taken and/or a schedule for completing the necessary corrective actions. The response should be submitted to:

U. S. Environmental Protection Agency, Region VII

ATTN. _____

If you have any questions about this Notice or wish to discuss your response, you may call me at _____, or _____ (Compliance Officer) at _____.

This Notice prepared by Michael J. Martin Date: 10/18/2012

The undersigned person acknowledges that he/she has received a copy of this Notice and has read same.

Printed Name:

Signature:

Title:

Kent W. Frame Date: 11/01/2012
[Signature]
Facility General Manager

HANDLER INFORMATION REPORT

September 26, 2012

PROCEDURES for Inspectors performing Site Visits

If the facility wants to make a change, they must complete a Notification of Regulated Waste Activity form and send it to KDHE-BWM, 1000 SW Jackson, Ste 320, Topeka, KS 66612-1366. The form can be found at <http://www.kdheks.gov/waste/forms/hazwaste/gen500-notifyofregactivity-hwgen.pdf>

If during the course of the site visit, the inspector/investigator becomes aware of any changes which should be made to the information printed on this form, please make the corrections and return the form to: Beth Koesterer, AWMD/WEMM.

EPA RCRA ID Number: KSD007246846

Name of Company/Site: CLEAN HARBORS KANSAS LLC
Location of Site: 2549 N NEW YORK AVE
WICHITA, KS 67219
SEDGWICK County
02 State District

Land Type: Private

NAICS: 562211 - HAZARDOUS WASTE TREATMENT AND DISPOSAL

Mailing Address: 2549 N NEW YORK AVE
WICHITA, KS 67219

Site Contact: ~~BRIAN KEY~~ Kent Frame
Job Title: GENERAL MANAGER
Address: 2549 N NEW YORK AVE
WICHITA, KS 67219
Email: KEY.CHARLES@CLEANHARBORS.COM
Phone Number: (316) 269-7484 316-833-4952

Current Owner of Site: CLEAN HARBORS KANSAS LLC
Phone Number: (316) 269-7418
Owner Type: Private

Current Operator of Site: CLEAN HARBORS KANSAS LLC
Operator Type: Private

TYPE(S) OF REGULATED ACTIVITY: Federal Large Quantity Generator
State LQG (Large Quantity Generator)
Haz Waste Treater, Storer, Disposer, per EPA
Haz Waste Treater, Storer, Disposer, per site
2009 LQG BIENNIAL REPORT FEES PAID
2010 LQG HAZWASTE REPORT FEES PAID
2011 LQG BIENNIAL REPORT FEES PAID

Hazardous Wastes Handled:

D001	D002	D004	D005	D006	D007	D008
D009	D010	D011	D012	D013	D014	D015
D016	D017	D018	D019	D020	D021	D022
D023	D024	D025	D026	D027	D028	D029
D030	D031	D032	D033	D034	D035	D036
D038	D039	D040	D041	D042	D043	F001
F002	F003	F004	F005	F006	F007	F008
F009	F010	F011	F012	F019	F024	F025
F032	F034	F035	F037	F038	F039	U001
U002	U003	U004	U005	U006	U007	U008
U009	U010	U011	U012	U014	U015	U016
U017	U018	U019	U020	U021	U022	U023

(Continued on back)

Date of Site Visit:

October 17-18, 2012

Name of Inspector (Please print):

Michael J. Martin

(Check one): ☐ EPA R7 ENSV ☒ EPA R7 Contractor ☐ NOWCC/SEE Investigator

Signature of Inspector:

Michael J. Martin

HANDLER INFORMATION REPORT

September 26, 2012

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U024	U025	U026	U027	U028	U029	U030
U031	U032	U033	U034	U035	U036	U037
U038	U039	U041	U042	U043	U044	U045
U046	U047	U048	U049	U050	U051	U052
U053	U055	U056	U057	U058	U059	U060
U061	U062	U063	U064	U066	U067	U068
U069	U070	U071	U072	U073	U074	U075
U076	U077	U078	U079	U080	U081	U082
U083	U084	U085	U086	U087	U088	U089
U090	U091	U092	U093	U094	U095	U096
U097	U098	U099	U101	U102	U103	U105
U106	U107	U108	U109	U110	U111	U112
U113	U114	U115	U116	U117	U118	U119
U120	U121	U122	U123	U124	U125	U126
U127	U128	U129	U130	U131	U132	U133
U134	U135	U136	U137	U138	U140	U141
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U156	U157	U158	U159	U160	U161	U162
U163	U164	U165	U166	U167	U168	U169
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U192	U193	U194	U196	U197	U200	U201
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U209	U210	U211	U213	U218	U219	U220
U221	U222	U223	U225	U226	U227	U228
U234	U235	U236	U237	U238	U239	U240
U243	U244	U246	U247	U248	U249	U271
U278	U279	U328	U353	U359	U364	U367
U372	U373	U387	U389	U394	U395	U404
U409	U410	U411				

I 02/08/94 1+ 1st N 07/07/98 N 03/05/12 1+

Certified by Notification on 03/05/12 by
STEPHEN A BLEY 02/10/12
COMPLIANCE MGR

Date of Site Visit:

October 17-18, 2012

Name of Inspector (Please print):

Michael S. Martin

(Check one): ☒ EPA R7 ENSV ☐ EPA R7 Contractor ☐ NOWCC/SEE Investigator

Signature of Inspector:

[Signature]

ATTACHMENT 0 Page 2 of 2

DESIGNATED FACILITY TO GENERATOR

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator ID Number KSD007246846	2. Page # of 1/1	3. Emergency Response Phone (800) 483-3718	4. Manifest Tracking Number 005258841 FLE		
5. Generator's Name and Mailing Address Clean Harbors Kansas LLC 2549 North New York Street Wichita, KS 67219 Generator's Phone: (316) 269-7400							
6. Transporter 1 Company Name Clean Harbors Environmental Services Inc ROBBIE D. WOOD U.S. EPA ID Number MA0886322250							
7. Transporter 2 Company Name ROBBIE D. W. CHANTHACORN ENV. SR U.S. EPA ID Number MA0886322250							
8. Designated Facility Name and Site Address Clean Harbors El Dorado LLC 309 American Circle El Dorado, AR 71730 Facility's Phone: (870) 863-7173 U.S. EPA ID Number ARD069748192							
9a. HM	9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Number, and Packing Group (if any))			10. Containers	11. Total Quantity	12. Unit Wt./Vol.	13. Waste Codes
				No.	Type		
	1. UN2028, BATTERIES, DRY, CONTAINING POTASSIUM HYDROXIDE SOLID, ELECTRIC, STORAGE, 8, PG III			001	DF	00005	G
	2.						
	3.						
4.							
14. Special Handling Instructions and Additional Information 1. LED2-INTER ER00154 LX5							
15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by the proper shipping name, and are classified, packaged, marked and labeled/placarded, and are in all respects in proper condition for transport according to applicable international and national governmental regulations. If export shipment and I am the Primary Exporter, I certify that the contents of this consignment conform to the terms of the attached EPA Acknowledgment of Consent. I certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am a large quantity generator) or (b) (if I am a small quantity generator) is true. Generator's/Officer's Printed/Typed Name: C. Brian Key "Agent for CHES" Signature: C. Brian Key Month: 5 Day: 7 Year: 12							
TRANSPORTER	16. International Shipments <input checked="" type="checkbox"/> Import to U.S. <input type="checkbox"/> Export from U.S. Port of entry/exit: Port of entry/exit: Date leaving U.S.: 5/18/12						
	17. Transporter Acknowledgment of Receipt of Materials Transporter 1 Printed/Typed Name: JOHN MEYER Signature: John Meyer Month: 5 Day: 18 Year: 12 Transporter 2 Printed/Typed Name: Kevin Burger - Agent for CHES Signature: Kevin Burger Month: 5 Day: 19 Year: 12						
DESIGNATED FACILITY	18. Discrepancy						
	18a. Discrepancy Indication Space <input type="checkbox"/> Quantity <input type="checkbox"/> Type <input type="checkbox"/> Residue <input type="checkbox"/> Partial Rejection <input type="checkbox"/> Full Rejection						
	18b. Alternate Facility (or Generator) Manifest Reference Number: U.S. EPA ID Number						
	Facility's Phone: 18c. Signature of Alternate Facility (or Generator) Month: 5 Day: 18 Year: 12						
19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous waste treatment, disposal, and recycling systems) 1. H141 2. 3. 4.							
20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials covered by the manifest except as noted in Item 18a Printed/Typed Name: John Meyer Signature: John Meyer Month: 5 Day: 18 Year: 12							